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Editor
Joann Grayson, Ph.D.
Managing Editor
Charlotte McNulty, M.A.
Photography
David Latham

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Child Abuse and Neglect in the Military: The Problems . . . The Solutions.

While a subsystem of our culture, military lifestyle is very different than that of civilians. The military is a system with clear organizational structure characterized by well defined lines of authority. These lines are visible even to the uneducated eye, reflected in such things as differences in uniforms worn by military personnel.

For the most part, members of the military system are fiercely patriotic and loyal to their country. There is a high regard for discipline and a high value placed on sacrifice. The issue of sacrifice is one that involves not only military personnel but also their families. A military career means a 24-hour-a-day commitment. Families are expected to move anywhere at any time. Also, family members often endure long separations from one another.

The military is a system where equality is taken seriously. Equal opportunity exists for all, and anyone with ability should be able to climb the ladder of success. There is no segregated housing, there is an equal right to good medical care, and there is no unemployment.

In this system, the "boss" becomes much more involved in the personal lives of those under his command than does a civilian employer. A commander can influence family life and become directly involved when problems come to his attention. He "walks a tight rope between invasion of privacy and meeting command responsibility" (Miller, 1976, p. 272.)

The commander's attitude toward his personnel and their families, then, can be important to crisis intervention and problem solving. And, his knowledge of and attitude toward human service agencies can be an essential ingredient in prevention or rehabilitation of family problems.

Presently the military is focusing a great deal of energy on dealing with the concerns of the military family. However, there are difficulties when the issue is child abuse and neglect. Basically, the problems center around three issues: reporting inadequacies; the "at risk" environment of the military; and the fact that there is no legal mechanism for child protection in the military system of



Strengthening families has become a high priority for the military.

justice. This article will examine these problems and the partial solutions.

The Problems

Reporting Inadequacies:

Most sources agree that very little research has been done on maltreatment in the armed services (Bowen, 1983; Carmody, Lanier and Bardill, 1979; and Miller, 1976). "The military has a problem similar to the rest of the nation in determining incidence," stated Maj. R. B. Robertson, who is with the U.S. Marine Corps Family Advocacy Program at Marine headquarters in Washington, D.C. "It's mainly a problem of reporting. I'm not at all comfortable with military statistics of child abuse and neglect."

"Amen," said others in a panel of military personnel during a presentation at the Sixth National Convention on Child Abuse and Neglect in September, 1983 in Baltimore, Maryland.

This concern is echoed by civilian experts in child abuse and neglect. It is often suggested that the present statistics on child abuse and neglect are merely the "tip of the iceberg." Underreporting is often attributed to such factors as unwillingness to get involved, lack of awareness of the problem, or

ignorance about reporting procedures.

Military underreporting may reflect a few additional factors. Reporting problems are confounded by concerns about confidentiality since military personnel are not mandated reporters under most laws. Second, there is a viable concern about career consequences for the perpetrator. There is no mechanism for rehabilitation in the military code. Rather, a punitive approach is more often taken. The most severe penalty is criminal charges and discharge or jail. At the least, a report to those in authority could result in ruined chances for promotion.

There are those who would suggest that the incidence of child abuse and neglect is greater in the military than in the civilian segment of society. This may be due to the fact that the average civilian sees military life as equated with aggression and violence. There is often a bias against the military lifestyle, with the general attitude that "whatever seems bad in civilian life often seems to be worse if it occurs in military life" (Miller, 1976, p. 268).

Incidence figures do suggest a serious problem. "In 1977, for instance, 1500 cases of child maltreatment were reported in the

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Virginia Chapter of the National Committee for the Prevention of Child Abuse

Prevention Chairpersons Named

April seems far away. Yet, before you know it, Child Abuse Prevention Month will be here. Will you be ready? Two dedicated VaNCPA members have joined forces to be certain each of you have the support you need to make Child Abuse Prevention Month an event of note in your community. Sue Gibson, past president and one of the founders of VaNCPA and Johanna Schuchert, who is also executive director of Virginia's Parents' Anonymous have agreed to cochair the committee. Sue can be reached at 6109 Studeley Avenue, Norfolk, Va. 22834. Her phone number is (804)423-3983 or (804)423-6616. Johanna's address is 7810 Wistar Village Drive, Richmond, Va. 23228. Her phone number is (804) 264-2901 (W) or (804) 288-7729 (H). Join us in making communities aware of the good work that is happening and the yet unmet needs.

Governor's Advisory Committee News

Nomination for Advocate Awards Sought

Criteria for Certificate of Appreciation

General Criteria

It is the intent of the Governor's Advisory Committee to recognize those persons whose activities in the area of child abuse and neglect have shown exceptional merit. To qualify, the recipient's contribution must be truly outstanding, clearly setting them apart from their peers. The recipient will be characterized by an evident quality of caring that permeates throughout all of their activities. The impact of the recipient's efforts on those most affected will be of major importance, and any enduring contribution to overall program quality will also be considered. The Governor's Advisory Committee plans to issue the certificates at their discretion in response to nominations from knowledgeable members of communities or agencies as well as nominations from members of the Governor's Advisory Committee.

Eligibility

The recipients will be residents of the Commonwealth of Virginia. Certificates may be awarded to volunteers and professionals.

Specific Criteria

1. A significant demonstration of concern and caring for others;
2. Exceptional effort and time commitment requiring personal sacrifice;

Prevention Guidebook

There is still time to write for your free copy of the Prevention Guidebook! The publication date of October 15 was missed. Send your name and address to: Joann Grayson, Ph.D., Center for Child Abuse Education, Department of Psychology, James Madison University, Harrisonburg, Va. 22807.

Brochure Still Available

VaNCPA, the Virginia Bar Association, Young Lawyers Section, and the Medical Society of Virginia have jointly sponsored the printing of a brochure on child abuse and neglect. The brochure outlines the problem, gives definitions of the various types of child abuse, summarizes the law, and features the hot line number.

Copies can be obtained from: Donald W. Lemons, Minor & Lemons, P.C., Attorneys and Counsellors at Law, 8001 West Broad Street, Richmond, Virginia 23229.

3. Indication that others' lives have been improved as a consequence of the recipient's actions;
4. The example set by the recipient serves as inspiration to others.

Applications and further information are available from: Beverly Brewer, County Administrator, P.O. Box 65, Surray, Virginia 23883, 804-294-3137.

Citizen Comment Solicited

The Governor's Advisory Committee will schedule meetings at five locations in the Commonwealth to hear citizen comments. Individuals may request time on the agenda to present ideas, concerns, and issues. The GAC is particularly interested in comments concerning treatment and prevention needs.

A task force will study all ideas and will formulate recommendations. These recommendations will be incorporated into a proposed 1985 statewide conference on child abuse and neglect, celebrating the 10th anniversary of Virginia's child abuse and neglect law. The conference theme will be examining the past 10 years and charting the future.

The schedule of GAC meetings is as follows:

Dec. 2, 1983—Tidewater; Feb. 3, 1984—Northern Virginia; March 2, 1984—Lynchburg; May 4, 1984—Southwest; June 1, 1984—Richmond;

To reserve a place on the agenda, or for more information, call, toll-free, (800) 552-7091.

Family Violence Program Under Review

The effectiveness of the Virginia Family Violence Program is being reviewed. This program is a surcharge on the marriage license fee, allocated for funding spouse abuse services and child abuse prevention programs. Last biennium, the surcharge generated over \$800,000.

Each biennium the legislature must consider reallocation of this money. It is vital that the money continue to be allocated for child and spouse abuse prevention and treatment. VaNCPA has written a letter of support for the program. Others interested in commenting on the Virginia Family Violence Prevention Program should address letters to Sen. Edward Willey, Senate Finance Committee and Del. Richard Bagley, House Appropriations Committee. Letters should be written immediately, as sessions begin January 2.

VaNCPA is also informed that the marriage surcharge this last biennium has generated more than the expected \$800,000. VaNCPA is supporting allocating these additional funds to the Family Violence Prevention Program. Comments on this allocation may also be addressed to Senator Willey and Delegate Bagley.

"Hugs and Kisses" Tour Completed

The statewide tour of "Hugs and Kisses", a play about child sexual abuse for children in grades K through 6 recently toured Virginia. Sponsored by VaNCPA and performed by Theatre IV of Richmond, the play was presented to interested citizens, including social workers, educators, school board members and parents in each of Virginia's seven regions. The purpose of these showcase performances was to receive feedback on the play and to advertize the availability of 30 free performances this spring. Initial evaluation results are overwhelmingly positive! (Editor's note: The next issue of VCPN will feature an article on child sexual abuse prevention and will detail the complete evaluation results of "Hugs and Kisses".)

The funding for "Hugs and Kisses" is made possible by a grant from the Virginia Family Violence Project. Requests for spring performances should be submitted by Dec. 2, 1983. Forms are available from the chapter address. Additional information may be obtained by calling Theatre IV (804-353-1048). A selection committee working in conjunction with local MD teams will arrange the free performances. Priority will be given to schools and every effort will be made to make showings available in each of Virginia's seven regions.



Child Abuse And Neglect in the Military

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military and 1900 cases were projected for 1978. More recently, Sen. Daniel Inoué caused alarm in the military services when he charged that military families in Hawaii constituted about one third of the state's reported abuse, but comprised only 16% of Hawaii's population" (Department of the Navy, 1983).

Others maintain that incidence may be lower in the military population than in the civilian sector (Acord, 1977). Support services in the military such as guaranteed income, medical care and community services may lessen the potential for child maltreatment (Broadhurst, Eskey, Hughes, Jenkins, and Martin, 1980).

In fact, given reporting problems and lack of data, there is little support for either claim (Department of Navy, 1983; Miller, 1976).

The "At Risk" Environment

A number of resources have noted that the military environment combines several factors which correlate with risk of child abuse. "Although studies from the military and civilian communities suggest that child maltreatment varies across a number of demographic, individual, and situational factors, several are particularly relevant to the military community: family demographics, stress and social isolation" (Bowen, 1983).

The age of the perpetrator has been found to be one indicator of the likelihood of child abuse and neglect. According to the literature, a higher percentage of child maltreaters are under the age of 30. This is particularly relevant when one considers that "in the military community more than half of active duty men are aged 30 or younger compared to one quarter males in the civilian community" (Bowen, 1983).

In a 1980 issue of *Aware*, Dr. A. I. Snyder gave statistics for numbers of young families in the military. In comparing the numbers of married enlisted personnel in the Navy, she found that the numbers of married E2's in

1958 were 5,737 while in 1980 there were 58,143; the number of married E3's in 1958 numbered 20,204 while in 1980 they numbered 99,641. According to Dr. Snyder, virtually all E2's and E3's are under the age of twenty. These statistics, then, imply an enormous problem (Snyder, 1980).

In one study specifically studying characteristics of 225 abusing or neglectful military families, the abusing parents were found to be quite young. "Over 40% of the abusing mothers were under 20 years of age and 65% were under 23. Forty-five percent of the fathers were 20 or younger and 75 percent were 25 or younger" (Carmody, Lanier and Bardill, 1979, p. 16). Miller (1976) suggests that in civilian groups this younger age is often considered as high risk because of several factors: immaturity, inexperience, lack of social skills and inability to cope with life's problems. One can consider these qualities to be typical of young military personnel. Miller remarks, "The uniformed services attract and recruit young people who have not developed specific life goals but are still in the phase between adolescence and adult maturity" (p. 276). Miller thinks that the young enlisted family is the most vulnerable population in military society for child abuse and neglect. These young military families possess two "high risk" characteristics: they are likely to have young children and they are likely to have less education compared to the rest of the military population.

Situational stress has often been associated with the problem of child abuse and neglect. Some of the family stresses most often correlated with child maltreatment include larger family size, financial hardship, pregnancy, prematurity of the child, job dissatisfaction and single parenthood (Miller, 1976; Shannon and St. John, 1980). Many of these factors seem to be particularly apparent in military families.

The military life style requiring high mobility can frequently leave a spouse at home with primary responsibilities for children and financial matters, creating a situation similar to single parenting. In many cases, it means children are born without the presence of the military member. The stresses of single parenting and household management can become overwhelming.

Additionally, the military has recently found itself with members of its ranks actually being single parents. This issue was addressed at the sixth National Conference on Child Abuse and Neglect. A participant suggested to Dr. John Johns, assistant secretary of defense, Office of Health Promotions, that the military is avoiding dealing with the problem and may in fact be aggravating it. For example, many single parent personnel find themselves in isolated duty stations lacking in resources, such as child care facilities. Dr. Johns acknowledged the concern of single parents in the military as "a terrible problem."

Financial management is a struggle for the young enlisted person, particularly those with a low rank. While no longer paid an

income making them eligible for federal food stamps, the pay is often inadequate for the high cost of living in metropolitan areas where many military installations are located. This, compounded with youth and inexperience, leads to mismanagement of funds. Miller states the case, "[The young enlisted man] has borrowed money to buy tires for his car and to rent a trailer to get [his family] and their limited personal goods to their next assignment. Upon arrival at the post, he finds they cannot get post housing, rents are high outside, and the family settles for the minimum facilities they can get. They do not know the existing system well, and if they encounter problems they are hesitant to seek out a sergeant or a commander for help. Such a series of events culminates in a crisis environment conducive to child neglect and abuse. The family is either almost totally isolated in a trailer park, a small rundown apartment, or they have few friends in the same area with the same problems. If they do not already have a child, they soon will" (p. 277).

If there is one reward of being a member of the military it is that the military will pay all medical expenses for childbirth and child care. However, with the long absences the family endures, this is a prime situation for a role reversal. "For the lonely young wife whose husband is often gone on maneuvers, guard duty, and other military details, the house would seem less lonely with a child. In other words, the baby is expected to meet her needs - and that is one of the prime manifestations of the potential maltreating mother" (Miller, 1976, p. 277).

High mobility in the military contributes to the problem of social isolation. Military assignments are of relatively short duration. Within that assignment, it is not uncommon to have several times when families are separated. Further, the military seems to have a particularly hard time integrating the young military family into their social system. These conditions result in isolation from formal and informal social networks such as parents, friends, neighbors, and community services. "In addition few [military families] are engaged in social or recreational outlets" (Military Family, 1983). This observation is supported by Carmody, Lanier and Bardell (1979) who found that 75% of their military subjects were living in civilian communities, usually engaging in no meaningful contacts with their civilian neighbors or community agencies. In addition, they found that 40% of their subjects had lived in their present quarters for less than one year and over 80% for under two years.

These two factors - high mobility and social isolation - clearly result in an environment which has been correlated with risk of child maltreatment.

Lack of Legal Remedies

The Military Code of Justice is the prevailing system of law for the military. In it there are no provisions for child protection, especially when the abuse or neglect is caused

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Virginia's Picture: A Study in Contrasts

The incidence of child abuse and neglect in Virginia's military families is no easier to assess than anywhere else in the nation. It is likely that the reported numbers are less than the actual incidence. However, when one searches for numbers, they aren't easily found. The annual report published by Child Protective Services does not have any category indicating what number of reports in Virginia come from military families. In December 1982, however, the Virginia Pilot-Ledger Star reported some statistics for the Tidewater area: During the 12 months ending December 1, "There were 129 reports of possible child abuse from the 1,200 Navy housing units in Tidewater. Of these cases 45 confirmed, and 16 are still under investigation."

The Pilot-Ledger Star article stated that this rate of abuse reports is "roughly 10 times higher than that for the state as a whole." Navy officials pointed out, however, "that the people living in the 1,200 residences generally are young families who are more likely than a randomly selected Virginia household to have children at home."

When various social workers in areas with high concentrations of military families were asked about the incidence, they stated that child maltreatment is a problem and one of great concern. A particular concern exists when housing falls under federal exclusive jurisdiction (see feature article for further information). Land under federal jurisdiction means that state and local authorities have no control. Therefore, Virginia social workers have no legal authority in those areas and have difficulty intervening in cases of child abuse. Some localities have been able to overcome the jurisdiction problem with a memorandum of agreement. Others, unfortunately, have not.

VPCN talked to service providers involved with the military child abuse and neglect in Norfolk and in Fairfax. In these areas the problems are similar but the solutions have been different.

Norfolk

Norfolk accommodates one of the largest naval installations in the world. Most military families are assimilated into the community as they mainly live in housing or on property that falls under proprietary or concurrent jurisdiction. When these families have problems of child abuse and neglect and a report is made, CPS becomes involved as it would with any other family. However, there are three housing areas in Norfolk which are on federal exclusive jurisdiction reservations: Ben Moreell, Torguson and Capehart. These areas are the problems.

In November 1982, Lt. Zoeller, a uniformed social worker with the Norfolk Navy Family Advocacy Program, appeared before the Governor's Advisory Committee on Child Abuse and Neglect. His concern? Ben Moreell, a naval housing area. "We have a dangerous

Norfolk—

"We have a dangerous situation . . . money is apparently the problem."

situation there," he stated. Up to that point he and other Navy personnel had made an effort to come to some agreement with the Norfolk city council regarding the handling of child abuse reports from this area. Now, however, negotiations were at a standstill. "Money is apparently the problem," he said. He went on to explain that through a series of contacts, the Navy suggested that the federal land be returned to the state for provision of services. Norfolk, having no authority to tax, wanted payment for the services the area would receive since this would cause a burden on already burdened CPS workers and on the commonwealth's attorney. The Navy had no mechanism for such payment. Stalemate. Zoeller was appealing to the Governor's Advisory Committee to look into the problem and see if they could be of assistance. "I am truly concerned about the children in that area," he emphasized.

VPCN requested an interview with Lt. Zoeller this fall wanting to know what had transpired since November 1982. The request was denied by his superiors.

VPCN did have access to another resource involved in the Norfolk problem. Carl Williams, assistant attorney general, who is also a member of the Governor's Advisory Committee on Child Abuse and Neglect, agreed to be interviewed. When Lt. Zoeller first visited the advisory board, the membership asked Williams to investigate. He has been working on the problem ever since. "State officials have met with Navy officials on several occasions. In addition, they have all met with Norfolk officials," Williams explained. At this point in time, officials are waiting for a letter from the Norfolk commonwealth attorney concerning the impact that providing services will have on his office. He went on to explain that two alternatives were under consideration: a memorandum of agreement and changing the lands to concurrent jurisdiction.

In essence, a memorandum of agreement is a legal contract between the military and a local community. It spells out conditions whereby the local community can enter onto federal lands with authority. An agreement with CPS, then, would state those conditions which would ensure their authority to protect children.

Concurrent jurisdiction, on the other hand, means that the federal government would share authority with state governments. This, too, ensures the authority for CPS to protect children in these areas.

When Williams was asked what he thought the problem was, he replied, "Apparently

Fairfax—

"When we consider the overall positive impact of the military on revenue, providing services . . . becomes a minor problem."

money. Either solution is an expense to the city and the state, and it will cause an increase in case load on CPS workers and in the commonwealth attorney's office. These are problems."

While the civilian and military authorities wrangle with the problem of exclusive jurisdiction, the Navy Family Service Center is trying to deal with the dangerous situation caused by the lack of services to these areas.

In 1978, the Navy began to develop a family service center for the Navy. Staffed by civilians under contract to Family Services of Tidewater, the center provides a variety of services to naval families (See "Reflections of a Former Navy Wife," this issue). Recently, Family Services of Tidewater, with the aid of many Navy personnel, wrote a proposal for monies from the Virginia Family Violence Fund to provide direct services to the housing areas falling under exclusive federal jurisdiction. The monies were granted in July, and the program is well underway.

Sally Avery, outreach social worker under this grant, discussed her project with great enthusiasm. "This project has several important goals," explained Avery. "Primarily, we are interested in reducing the incidence of child abuse and neglect in these areas. We also hope to reduce the social isolation which helps maintain the problem."

The project has two main components. One involves direct intervention when the base police get a report to investigate; the other is prevention.

The mechanism for the first part is already in place. The military police receive reports and handle the investigation. Once the problem is assessed, Avery is called in on those cases warranting intervention. She acts much like any CPS social worker, talking to the family about the problem, assessing the family's needs and trying to coordinate these needs with available services. Services can include those provided by the Navy Family Service Center or counseling through community agencies or a private practitioner. "Champus [military health insurance] will pay for 80% of the service provided by community mental health deliverers," Avery explains.

There is still a problem with children in an emergency situation. CPS has no authority to remove the child, nor can the local Juvenile Court order a removal. "In a really dangerous situation, we have been able to petition the local court and they have intervened," she said. "But, they are reluctant to continue doing so given their real lack of authority in the matter."

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Reflections of a Former Navy Wife

"Ambivalence" is the word I would use to describe my feelings about interviewing folks at the Norfolk Family Services Center. The reasons for this feeling were many. On the one hand, I remember well what it was like to be a member of the "Navy family." From 1967 to 1971 I was the wife of a junior officer. There was no Navy Family Services Center then. As a matter of fact, the attitude expressed in "If the military had wanted you to have a wife it would have issued you one" prevailed. When my husband's ship was on deployment, I managed funds, apartments, jobs, a pregnancy and the birth of my first child - alone.

Fortunately, I had a network of friends through my jobs, good neighbors, good coping skills and an extended family nearby who welcomed me into their home. My family supported me through the birth of my child and allowed me to live with them until she was four months old, at which time my husband returned. I was lucky - so was my daughter.

On the other hand, I was very interested in the Navy's first Family Services Center. I wanted to learn what it had to offer. Frankly, I was skeptical. Could the Navy's attitude have changed so drastically in such a short period of time? I was to see. On to Norfolk I went.

From the second I saw the Navy Family Service Center my skepticism began to dissipate. It is in a spacious building with "NAVY FAMILY SERVICES CENTER" written in such large letters they could be seen from a long distance. Across the street is a lovely, modern, new building. The sign said "Navy Child Care Center." I was impressed.

As I entered the building, I was taken by the amount of activity. This was a very busy place! The people were warm, and the waiting room was full of toys, books and brochures. It was a comfortable environment. There was a bulletin board full of information about services. There was also a T-shirt hanging there. I smiled as I read "NAVY WIFE (It's the toughest job in the Navy)". I was becoming a believer.

The clincher for me occurred, however, upon receiving a "briefing" from Warren Reynolds, retired master chief petty officer with the Navy Family Services Center. He began by describing the history of the Navy Family Services Center. In 1978, he recalled, the Navy held a three-day family conference in Norfolk, drawing Navy personnel from all over the world. The purpose was to acquaint Navy personnel with the needs of Navy families. It was important to the mission of retention of personnel as well as assisting in their "wellness" - a healthy, happy family can mean a healthy, happy member of the Navy.

As a result of this conference, Admiral Nicholson, then commander of the Norfolk Naval Base, told his command master chief petty officer, Warren Reynolds, and other staff, that he planned to develop a "One Stop

Shopping Center for the Navy Family." He wanted a Navy Family Services Center "on line" and quickly. "There was no money budgeted, no staff available; but, within seven months we had a Navy Family Services Center. Shows what can be done when you're determined," says Reynolds who is proud to have been a part of the concept from the beginning.

The list of services being provided is long; the description of each is impressive. All of the programs are geared toward assisting the family. Some can be identified as primary prevention of child abuse and neglect. These are—

1. Twenty-four hour hotline manned by trained personnel who assess problems and make referrals.
2. Parent-Child Cooperative - A child care co-op located in one of the Navy housing areas. The co-op has a trained "master teacher," and each mother commits at least one morning a week. The other mornings she is free of child care responsibilities. "We have 30 children and a waiting list of at least that many," says Reynolds. "We need more of these in the Navy. We also need the money to provide them."
3. Love and Learning - A program for parents and their new babies. The parents with their babies meet weekly with a trained volunteer leader. "It's an opportunity to talk about their babies, practice activities that stimulate baby's growth and development and find support for parenting as a Navy family," explains Reynolds.
4. A military liaison for the developmentally disabled - a person who serves as a referral source and advocate for families with disabled children.
5. Parenting Classes - With approximately 70 volunteers from whom she can draw a variety of skills, the volunteer coordinator has implemented several parenting programs. These are programs for parents of adolescents and programs for parents of younger children.
6. Welcome Baby Program - Trained volunteers make visits to mothers who have been identified as potentially abusive during post partum at the local naval hospital. The volunteer mails out materials as well as maintains telephone contact periodically with the new mothers.
7. Family Financial Planning - Trained volunteers conduct groups on money management as well as assist individuals in developing and keeping within a budget.

These are but a few of many services provided by the Navy Family Services Center. In addition, they have an information and referral desk, a retired affairs telephone line manned by volunteers, a chaplain, legal assistance, a speaker's bureau and a newsletter. Also, their volunteer coordinator is constantly assessing the needs of the naval



Charlotte McNulty, the managing editor of VPCN, was a Navy wife from 1967 to 1971. She currently resides in Harrisonburg with her two daughters and her husband Charles, an attorney.

community and the skills of the volunteers, matching them to develop new programs.

The Navy Family Services Center is an impressive operation. It is clear that the concerns of the family have become high priority. Information about the center gets out to every commander in the form of a packet containing fliers about services. These are disseminated to all newly arrived Navy families. All Navy personnel in Norfolk have an opportunity to use these services.

"The Navy plans to have 52 of these centers in the near future," Reynolds states proudly. "By then 96% of all Navy personnel will be able to get similar services."

As I leave the Navy Family Services Center, I compare my present feelings with those I had as I set out on this assignment. I am convinced the Navy's concern is genuine and that wives and children of Naval personnel are considered an important commodity. This attitude has many potential benefits. In addition to insuring that Naval personnel are healthy, it strengthens the family. By supporting a strong family unit, the Navy optimizes the ability of its personnel to perform at top capacity.

If the Family Service Center had been in operation when I was a Navy wife, perhaps being a member of the "Navy Family" might not have been so bad. With the support of the system, I may have found that being the wife of a member of the Navy was a pleasant experience rather than a lonely one. And, rather than feeling ambivalent about interviewing personnel from an organization that rejected me, I may have felt proud to have been a part of it all.

Charlotte McNulty

Virginia's Picture

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In order to facilitate the service delivery, Avery has formed a base MD team to work specifically with her. "I think this is necessary for the effectiveness of this program. So much is going to depend on networking and referrals," she said. The MD team members - representatives from Navy housing, the family advocacy program, the base legal office, and the Navy Family Support Center - meet on a regular basis to assist in identifying cases.

The prevention part of the program is still in the planning stages. "I am planning several programs," explains Avery. "First, I want to implement a strategy whereby the housing officer has a list of criteria indicating risk for child abuse or neglect. When officers identify an 'at risk' family who is entering their exclusive jurisdiction housing area, I meet the family, welcome them to the community and tell them about available services. Hopefully, by maintaining contact, we can work together to prevent a problem."

The other parts of the prevention program involve 1) starting social groups in the housing areas, with the hope of using these groups to increase socialization, presenting information and developing recreational activities; 2) starting a babysitting co-op where parents are actually involved in child care, learn about child development and parenting skills, as well as have time away from their children on days when they are not required to be at the co-op setting; and 3) working with community leaders in developing a wives' club.

"Ben Moreell has a newsletter, so a mechanism for communicating already exists," Avery explains. "This is an important link for organizing all these activities."

"I plan to be very visible to these families," Avery emphasizes. "I want them to know who I am and that I am available to offer support to them anytime they need it."

It is amazing what Avery has accomplished in the two months she has been employed under the Family Violence Grant. She knows she has a lot more to do, and she is working hard toward full implementation of program goals.

Fairfax

In contrast to Norfolk, the County of Fairfax and Ft. Belvoir Army Post have had a memorandum of agreement to provide child protection services for many years. "It has been in place since I've been here and during the tenure of two supervisors before me," explains Brenda Watson, CPS supervisor with the Fairfax Department of Social Services. When asked about the problem with money and the added burden on the courts, Watson replied that she didn't think that this had been an issue. "When we consider the overall positive impact that all branches of military have on revenue in our county, providing services for those families in the areas with federal exclusive jurisdiction becomes a minor problem."

Watson is very animated when she talks about the success of the relationship between the military and Fairfax County in handling child protective service cases. "I honestly believe that this relationship has been instrumental in saving children's lives."

"This program is implemented entirely through a multidisciplinary team," Watson explains. "And that, in a nutshell, is the success of the program."

How does it operate? A working relationship has developed between essential military personnel and CPS. The military police are often the first to receive a report. They will look into the problem. "The juvenile investigators are young and talented," Watson comments. "I have seen them do some beautiful work."

If the MPs think it's necessary, they will call CPS to investigate. "While the primary CPS worker assigned to military families is Lynn Tucker, someone else will investigate if she is not available. At this point, it's our responsibility, and we have authority, through the memorandum of agreement, to do what's necessary," Watson explains.

The next step is to staff the case. The MD team meets weekly and is a working organization. Composed of an Army pediatrician, an Army pediatric nurse practitioner, a family practice physician, the family practice social worker, an Army community health nurse, the military police, the director of the Army's Drug and Alcohol program, military social workers, a chaplain and the Fairfax CPS worker, the MD team decides as a group as a group what to do with the case. "We use each member according to their skills," says Watson. "All of us take responsibility for case management and follow up according to the needs of the child and the family. We review each case periodically, following it as a group from start to finish."

In addition to investigation and participation in case management, the Department of Social Services also runs a group at Fort Belvoir. The Fairfax CPS worker responsible for providing groups, Susan Watson, and Spec. 5 Patty Harris, an Army social worker technician, work with the women who have been identified as neglectful. "Self esteem and all the effects it has on child care and home management is the concern for this group," Watson remarks. "The group provides an opportunity for growth in a supportive environment and focuses on issues of self esteem and personal responsibility. There has been a lot of progress in many of these women."

The enthusiasm Watson expresses for the handling of child abuse and neglect in military families is contagious. She sums it up by saying, "It's a beautiful system of people working together. And, it works!"

One has to wonder what the differences are that allow problems to be overcome in one large metropolitan area while not in another. Regardless, it is apparent from the Fairfax model that military and civilian governments can cooperate. Together they can insure the safety of child victims.



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by a member of the personnel's family. Dr. Johns states the problem succinctly when he says, "We have no authority to remove a child from a home (except when there is immediate risk of life or limb), or to place a child in foster care, or to establish a family court or to require a nonactive abuser to participate in a rehabilitation" (Sixth National Conference on Child Abuse and Neglect, 1983).

Miller carries the idea further when he states "No military branch has entertained the idea that it might indeed need some kind of welfare department. These services are provided instead by a loosely organized system of chaplains, Army Emergency Relief, American Red Cross, military social workers and health nurses. There are no juvenile courts on military installations and these problems are considered to be command problems to be handled between military police, the unit leader and post commander, the family and sometimes a federal magistrate or the FBI . . . The problems of these blind spots become more apparent in the child protection area" (1976, p. 274).

As the military has become more educated to the problems of child maltreatment, they have gradually taken steps to tighten this "loosely organized system." They have done so through the establishment of Family Advocacy Programs and linkages with communities. The linkages have taken the form of developing a network between local child protection service agencies, community health practitioners and military personnel.

Linkages can break down, however, when a problem occurs in an area of federal exclusive jurisdiction. In our country, land falls under three categories: proprietary jurisdiction where state and local government have the rights and responsibilities; concurrent

jurisdiction where local and state governments share rights and responsibilities with the federal government; and, federal exclusive jurisdiction where the federal government holds the rights and responsibilities. Some military housing areas and all military installations are among the lands that fall under the last category. In these areas, child protective services and juvenile courts have no authority. Some areas have overcome the problem by entering into a legal contract, usually called a memorandum of agreement, giving the state and local government jurisdiction in those areas when the concern is child protection. However, some areas have confronted problems in efforts to develop this kind of agreement. These areas, then, are without resources and there remains a potential for serious danger to children.

The Solutions

Family violence has become a major focus for military energy and resources over the last few years. The Department of Defense (DOD) has developed an awareness that retention of personnel and "mission readiness" depends to a large degree on the wellness of its employees and their family members.

Traditionally, the ambivalence of attitudes was reflected by slogans such as, "The military takes care of its men," and "Our first priority is to be mission ready." Now, the emphasis is moving rapidly toward a family focus. According to Dr. Johns, one reason the shift was necessary was a change in the numbers of married personnel. "Approximately 25 years ago, 15% of military personnel were married," he explains. As a matter of fact, he noted a time when certain rank classifications of military personnel had to ask permission to be married. "Presently, however, we have great numbers of married personnel; 65% of the Air Force, 53% of the Army, 50% of the Navy and 37% of the Marine Corps," he added. This change resulted in a concerted effort to acknowledge the needs and concerns of the family.

More specifically, however, the military is responding to concerns about family violence. In 1974, the military departments published regulations mandating the development of treatment programs for child abusers as well as the care and protection of the abused. According to Johns, the General Accounting Office published a review of these programs in 1979. In it they suggested that the military was giving mere lip service to the problem and needed to become more aggressive in their approach. Thus, a 1981 directive from DOD established a military-wide family advocacy program. This directive established the goals and objectives for a family advocacy program which included a general education and prevention program, a specific prevention program for high risk groups and individuals, and specific therapeutic programs where abuse has occurred. It also recognized that the military must strive to make every effort to establish close linkages with the surrounding civilian community.

Medical Based Family Advocacy

Each branch of the service and the Coast Guard have established directives for the establishment of family advocacy programs. According to Miller, "Advocacy in the armed services has largely been a grass roots movement . . . where local command support has existed these workers have been able to develop policy, directives and approaches . . ." (p. 282).

For the most part, family advocacy falls under the direction of a medical command, with child advocates being located primarily in the hospitals and clinics. Each branch of the military has had varying degrees of success recruiting social workers as military personnel, with the Navy apparently having the least success. However, many civilians are hired by the military to fill spots for professionals in child advocacy teams. Ideally, the programs were established to provide prevention, investigation and treatment. Some do. However, many can only provide identification, referral and monitoring services. Since the majority of these programs are new, the hope is that more will soon be able to provide comprehensive services.

One aspect of family advocacy is the family advocate committee. These are child protection multidisciplinary teams made up of 10-12 professionals. Many teams have been able to establish a cooperative working environment, meeting regularly (often weekly) to staff and monitor cases. Each member has responsibility for case management, depending on their area of expertise and the needs of the family (see the article, "Virginia's Picture", this issue for more about a working team). Other teams serve primarily as a case review committee, meeting as infrequently as quarterly.

Family Support Services

In addition to military medical advocacy programs in hospitals and clinics, many branches of the service have set up family centers designed to provide prevention, crisis intervention and short term treatment programs (see "Reflections of a Former Navy Wife"; this issue). These centers are staffed by military personnel, civilians and many volunteers.

Military Administration Projects

The Department of Defense has been instrumental in funding and establishing two multiservice (all branches of the service and the Coast Guard) demonstration projects. One, the Military Family Resource Center in Springfield, Va., provides a mechanism for communications and training. The other - Project SAFE in Hawaii - provides actual delivery of service to military families who are experiencing the problem of family violence.

The Military Family Resource Center (MFRC): Located in Springfield, Virginia, the MFRC was established in 1981. Using DOD funds, the National Center on Child

Abuse and Neglect's administrative resources and the expertise of the Armed Services YMCA, this center was established as a national clearinghouse of information. It has been set up to provide four branches of the service and the Coast Guard with the following services:

1. **Research:** The MFRC has a computerized library for professionals who work with military families and those who conduct research on family members.
2. **Resources:** The MFRC has abstracted more than 1000 individual resources that are applicable to military family programs. These include: model programs, training curricula, audiovisual materials, pamphlets and publications.
3. **Special Projects:** The MFRC carries out special assignments in designing and conducting training, technical assistance, coordination of workshops and conferences, and preparation of papers, handbooks and manuals. This assistance is available to all levels of family service providers.
4. **Communication:** MFRC publishes "Military Family", a bimonthly newsletter directed at professionals and volunteers who work with military families. It is the primary mechanism for dissemination of information throughout the network of family service providers in each branch of the service.

Originally funded as a three year demonstration project, MFRC will be administered by the Armed Services YMCA as it transitions into the Department of Defense. It has provided tremendous service to the military. Presently, it is being institutionalized within the Office of Health Promotions, DOD, with the transition to be completed by October, 1984. For more information write Military Family Resource Center, 6501 Loisdale Court, Suite 1107, Springfield, Va. 22150, (703) 922-7671 or for non-Virginia residents, a toll free number, (800) 336-4592. (Information about MFRC was obtained from literature disseminated at the Sixth National Conference on Child Abuse and Neglect.)

Services Assisting Family Environments (SAFE): As a result of the GAO described need for family advocacy coordination, the Military Family Advocacy Coordination Council was established in the U.S. Pacific Command. Representatives from all branches of service, including the U.S. Coast Guard, the State of Hawaii, Department of Social Services, CPS and the Office of Children and Youth met to develop this organization as an information sharing body in order to provide coordination and standardization of services, improve cooperation and act as a monitor for family advocacy programs.

The council developed teams at major military installations in Hawaii, procedural guidelines for a memorandum of agreement with Hawaii's Department of Social Services and Housing and CPS, and standardized mechanisms of identification, reporting and

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follow up of cases. In addition, the council members identified three critical family advocacy problems common to all branches of the service:

- 1) There was a lack of full time advocates, with functions being performed by individuals as "additional duties."
- 2) There was a general lack of military treatment resources, with advocates merely able to evaluate, diagnose, report and monitor family violence problems at best.
- 3) There was a lack of military family shelters for battered women.

As a result of this needs assessment, the Military Family Advocacy Coordination Council requested enough funds for a three year demonstration project to try to fill this void in services to military families. It is being funded through Army, Navy and Air Force advocacy funds and is the first triservice family advocacy program of its type. This program is a highly complex one. It involves numerous civilians and military professionals and agencies. Basically, it has four objectives for meeting the problem of family violence:

- 1) To establish clinical service/outreach teams with a social worker, a paraprofes-

sional and a community health nurse at each of eight military installations in the state of Hawaii.

- 2) To establish a high risk screening program at Tripler Army Medical Center to identify high risk families and provide follow up home visitor services to prevent abuse and facilitate growth and wellness.
- 3) To create a shelter for abused spouses and their families. This shelter is staffed by a full time social worker and child care specialist. Clients may stay for up to five days during which time numerous services are provided.
- 4) To measure the effectiveness and the benefits of the previous three objectives.

Each of the first three objectives are being met by way of contact with civilian agencies located in neighboring communities. The fourth is being conducted via a contract with US Human Resources, Inc.

Information about this project was obtained at the Sixth National Conference on Child Abuse and Neglect through a presentation conducted by Lt. Col. Hubert A. Kelley, coordinator, Military Family Advocacy Programs, Hawaii; and Kenneth Lee, manager, Military Family Advocacy Demonstration Project, Hawaii; and through a presentation by Dr. John H. Johns, deputy assistant secretary of defense, Office of Health Promotion.

It is the hope of the members of this project and of Johns that several more projects like SAFE will be implemented over the years to come. "They are effective," says Johns. "They closely bond the military and civilian communities in the mutual effort by establishing a network for handling cases so victims do not fall through the cracks."

Family advocacy programs, support centers, resource centers and programs like SAFE can have a tremendous impact on the problem of child abuse and neglect in the military. They offer concrete systems for prevention, intervention, treatment, and case management. These programs provide support to military families at a time of stress and need. The long term benefits to the Department of Defense are great. With these programs comes a greater assurance that military personnel are healthy and, therefore, mission ready. And, with these programs comes the assurance that the military truly does take care of its own.

References available on request.

Correction

Apologies to Dr. Adah Maurer, author of *Paddles Away*. In our last issue, she was inadvertently referred to as male. Thanks to Lenore Behor, Ph.D. for calling our attention to this error.



Center for Child Abuse Education
Psychology Department
Harrisonburg, Va. 22807

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