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Adapting the International Protocol for Sexual Violence within the Department of Defense: Sexual Assault Prevention & Response Office

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ADAPTING *THE INTERNATIONAL PROTOCOL FOR SEXUAL VIOLENCE* WITHIN THE
DEPARTMENT OF DEFENSE: SEXUAL ASSAULT PREVENTION & RESPONSE
OFFICE

by

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APPROVAL

ADAPTING *THE INTERNATIONAL PROTOCOL FOR SEXUAL VIOLENCE* WITHIN THE DEPARTMENT OF DEFENSE SEXUAL ASSAULT PREVENTION AND RESPONSE OFFICE

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Tehnyat J. Sohail

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ABSTRACT

Objectives:
To adapt *The International Protocol on the Documentation and Investigation of Sexual Violence in Conflict* v2 (*IP2*) within the Department of Defense (DOD): Sexual Assault Prevention and Response Office (SAPRO) and Military Services to streamline reports of sexual violence when active-duty soldiers are deployed on military operations.

Background:
Sexual violence (SV) in the U.S. military is an ongoing public health issue that disproportionately impacts millions of military servicemembers worldwide. Particularly, active-duty women deployed on international military operations are at a heightened risk of sexual violence with limited resources for justice.

Methods:
A summary of the strengths and weaknesses of existing implementations of the *IP2* in global contexts were conducted. Recommendations for adapting the *IP2* to the U.S. context are provided.

Conclusions:
IP2 has been adopted in a few countries since its conception and a review of the literature identified limited implementations of the *IP2*. However, we argue that integrating the *IP2* within the DOD SAPRO will reduce sexual assault and provide retribution to survivors. Policy adaptations and future recommendations are discussed.

ACRONYMS

CARSV: Conflict and Atrocity-related Sexual Violence

CATCH: Catch a Serial Offender

CDC: Centers for Disease Control and Prevention

DOD: Department of Defense

DOD SAPRO: Department of Defense: Sexual Assault Prevention and Response Office

DRRI: The Deployment Risk and Resilience Inventory

DV: Domestic Violence

DVA: Department of Veteran Affairs

GBV: Gender-based Violence

GSESVC: Global Summit on Ending Sexual Violence in Conflict

IP2: International Protocol on the Documentation and Investigation of Sexual Violence in Conflict, version 2

IRC: Independent Review Committee

IPV: Intimate Partner Violence

MCIO: Military Criminal Investigative Organizations

MSF: Medicins Sans Frontier

PSVI: Preventing Sexual Violence in Conflict Initative

RPRS: Retaliation Prevention and Response Strategy

SAPR: Sexual Assault Prevention and Response

SARC: Sexual Assault Response Coordinator

SEM: Social-Ecological Model

SV: Sexual Violence

UN: United Nations

VA: Victim Advocate

GLOSSARY OF TERMS

For the purposes of this program, the term "sexual violence" (SV) is an umbrella term for different forms of SV, such as conflict-related sexual violence (CARSV). It is notable to mention that definitions related to this issue vary from the U.S. context and international contexts, such as the United Nations (UN). Thus, cultural sensitivities are taken into consideration.

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Conflict and atrocity-related SV (CARSV) refers to rape, sexual slavery, forced prostitution, forced pregnancy, forced abortion, enforced sterilization, forced marriages, and any other form of SV of comparable gravity perpetrated against women, men, girls or boys that is directly or indirectly linked to a conflict (UN Secretary-General, 2022).

Consent refers to words or overt acts indicating a freely given agreement to the sexual conduct at issue by a competent person; the lack of verbal or physical resistance from the use of force or threat of force does not constitute consent; a current or previous relationship or the manner of the person involved does not constitute consent; and lastly, there is no consent where the person is sleeping or incapacitated due to alcohol or drugs, mental incapacity, or a person under legal age (DIA, n.d.)

Military sexual trauma (MST) is any sexual activity experienced during military service in which you are involved against your will or unable to say no (DVA, 2021).

Rape consists of penetration, even if slightly, of any body part of a person who does not consent with a sexual organ; the invasion of the genital or anal opening of a person who does not consent with any object or body part (UN, 2014).

Sexual assault (SA) is the intentional sexual contact characterized by the use of force, threats, intimidation, or abuse of authority and instances in which the survivor cannot consent, that is a violation of bodily integrity and sexual autonomy that does not necessarily entail penetration (UN, 2014).

Sexual harassment (SH) refers to any deliberate or repeated unwelcome verbal comments, non-verbal, or physical contact of a sexual nature (DOD, 2020).

Sexual violence (SV) refers to any sexual act, an attempt to obtain a sexual act, unwanted sexual comments or advances, or acts otherwise directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting (WHO, 2012).

INTRODUCTION

1.1. The Problem

Sexual violence (SV) is a glaring public issue that persists in militaries worldwide, including the U.S. military (see Glossary for defined terms). Sexual assault incidence rates in the military rose by 38% from 2016 to 2018 (Kime, 2019), with most being among women. Data highlights that nearly 1 in 4 servicewomen report being sexually assaulted in the military (DOD, 2022). However, a report indicates that only a third of cases are reported as many survivors experience a negative reaction when doing so (DOD, 2018). Several factors related to military culture, structure, and environment may contribute to the high rates of sexual assault in the military, including an emphasis on violence, hypermasculinity, leadership climate, and workplace hostility (Acosta, Chinman, & Shearer, 2021). In nearly 90% of cases, the perpetrator was another servicemember, often within the same grade or slightly higher than the victim's rank (Kime, 2019). Given the nature of hierarchy and value of unit cohesion within military culture, survivors rarely see justice due to how crimes are investigated and prosecuted (Burns et al., 2014).

In 2021, due to the increase of sexual assault cases, the Secretary of Defense established a 90-day Independent Review Commission (IRC) for sexual assault in the military after reviewing government efforts in sexual assault prevention (DOD, 2021). The IRC developed more than 80 recommendations, in four broad areas: accountability, prevention, climate and culture, and support and care for survivors. Although the government has undertaken significant reform efforts informed by the IRC's recommendations, spearheaded by the DOD SAPRO, there is still significant work to be done, especially in international contexts when military personnel are deployed. Research shows that active-duty soldiers deployed overseas are more likely to report having been victimized of sexual assault (LeardMann et al., 2013). However, there has been little research on deployment's effects on the prevalence of sexual assault as much of this research focuses on combat-related effects rather than the unique characteristics associated with deployment.

Given the lack of attention to sexual assault related to deployment and to fill the gap between sexual assault reporting within the DOD SAPRO and Military Services, the project aims to revise existing the DOD SAPRO policy to integrate the *IP2* (Ribeiro & Ponthoz, 2017). Incorporating *IP2* would benefit the DOD SAPRO's current efforts for integrated violence prevention and provides accountability for victims by documenting SV. Therefore, the purpose of this capstone project is to adapt *IP2* to the DOD SAPRO and Military Services' integrated violence prevention policy to increase sexual assault reporting. It is imperative there are protocols put in place for survivors who are currently deployed or have been deployed in the past.

1.2. Extent of the Problem in the Military Services

A demographics report from the DOD indicates that women make up 17.3% of the active-duty force and 21.4% of the National Guard and Reserves, while men constitute 82.7% of the active-duty force (DOD, 2022 December). The ratio of men to women is staggering and a cause for concern given the hierarchical culture of the military.

Military-on-military SV is the most frequent type of violence that directly impacts operations, harms personnel, and disrupts recruitment of servicemembers (Hillman, 2009). Reports of sexual assault in the military increased by 13% from the previous fiscal year in 2021 (DOD, 2022 July). Data shows that between 9.5% and 33% of women report experiencing an attempted or completed rape while serving in the military (Turchik & Wilson, 2010). Of all the military branches, the Marine Corps reported 13.4% of female Marines experiencing sexual assault in 2021 (DOD, 2022 July). In comparison, this is higher than the 10% in the Navy, 8.4% in the Army, and 5.5% in the Air Force (DOD, 2022 July). However, given the nature of where the crime is committed, these numbers are likely underreported.

U.S. commanders, Congressional members, legal reformers, and educators are aware of the issue of rape and have poured significant resources to combat military-on-military SV. Military institutions have not dismissed the severity of this issue by failing to enact reforms or ignoring the allegations of their troops. In fact, the military has increasingly pushed resources towards SV prevention rather than response in recent years. In 2005, the Pentagon established the DOD SAPRO, which aims to eliminate sexual victimization by ensuring all military branches comply with sexual assault prevention and response (SAPR) policy.

1.2.1. Risk Factors

The military prides itself for its values of ethics, discipline, honor, and integrity; however, a completely unspoken language permeates deep in the history of the military. The military is the embodiment of a hyper-masculine institution that inevitably perpetuates attitudes and practices that normalize the culture of sexual assault. Soldiers are socialized in a culture of dominance, aggression, and violence.

Previous research shows individuals who have already been sexually assaulted in the past are at highest risk for sexual assault (LeardMann et al., 2013; Merrill et al., 1999; Sadler et al., 2003); the exact reason why is unclear. However, individuals who have previously experienced a sexual assault may engage in risky behaviors that may further increase their risk of sexual assault (Fear et al., 2008). Other characteristics such as gender, age, marital status, and sexual orientation is also associated with sexual assault victimization.

1.2.2. Rates related to deployment

While there is limited research on deployment's effects on the prevalence of SV, there is a growing body of literature indicating deployment's effects on mental health (Vasterling et al.,

2010). Much focus has been on combat effects rather than the unique stressors associated with deployment. However, in 2013, LeardMann and colleagues found deployed women who reported combat experience were more likely to report sexual victimization. In addition, a 2014 National Guard study used The Deployment Risk and Resilience Inventory (DRRI) to evaluate stressors related to deployment and found a correlation between unit support and decreased reports of SV among soldiers (Vogt et al., 2008; Walsh et al, 2014). The implications from these studies indicate that active-duty servicemembers are at an increased risk of SV, and thus, are in need of interventions that target the unique stressors that come with deployment.

1.3. Health Impacts

In recent years, the DOD has spearheaded many reforms to increase support and remove barriers to resources for survivors. Data from the Department of Veteran Affairs (DVA) highlights that health impacts related to sexual assault on military personnel cost the government nearly $900 million in 2010 and increased budget increased by 13.3% from fiscal year 2022 (DVA, 2022).

Sexual assault is recognized as a crime within the military; however, abuse of authority by the perpetrators often leads survivors of the crime fearful to report the incident. This is an alarming barrier, especially as existing literature indicates that SV can have many lifelong health repercussions (Sadler, Booth, Nielson, & Doebbling, 2000). Existing literature links SV to long-term health issues, such as physical (i.e., insomnia, headache, pelvic pain), mental (i.e., post-traumatic stress, depression, anxiety), and behavioral (i.e., substance abuse, eating disorders, employment and relationship challenges) consequences (Kimerling et al., 2007; Stander & Thomsen, 2016; Suris & Lind, 2008).

Furthermore, active-duty personnel who have experienced revictimization are at-risk for more severe cumulative health effects, especially when in combat (Smith et al., 2008; Street, Stafford, Mahan, & Hendricks, 2008). Military sexual trauma rates are as high as 15% among female veterans of the Operation Iraqi Freedom and Afghanistan wars, specifically (Haskell et al., 2010, Kimerling et al., 2010). Active-duty women who experience combat while deployed may find themselves in male-dominated environments while often in life-threatening situations and the prevention of sexual stressors may be more challenging, especially as perpetrators are less concerned with the consequences of sexual assault.

1.4. Research Plan

Given the gap in reporting procedures for active-duty servicemembers deployed on military operations, the project aims to revise existing SAPR policy that adapts *IP2* to benefit the DOD SAPRO and Military Services.

1.4.1 Specific Aims

The objective of this project aims to adapt an existing documentation tool for SV within the U.S. government to fill the gap in reporting for active-duty soldiers.

1.4.2. Research Strategy

Significance
The creation of this project will guide the DOD SAPRO's efforts towards the important goal of instilling prevention efforts to eliminate SV versus relying on response efforts.

Innovation
The project is unique as it adapts an evidence-based and internationally-focused sexual assault documentation tool. Attention to detail for international and domestic sensitivities were considered. An added advantage to this program is its utilization of the socio-ecological model (SEM) to ensure wide-scale impact.

Approach
The final product will include background on *IP2*, a summary of existing implementations of the *IP2*, and then, adapting *IP2* to fit within the DOD SAPRO and Military Services. Potential problems that may arise include insufficient data and materials on existing implementations.

CURRENT STATE OF MILITARY REPORTING PROCEDURE

2.1. Current SV Reporting Procedure within DOD SAPRO

2.1.1. DOD SAPRO Conception

Prior to 2005, the Secretary of Defense reviewed the DOD's process for treatment of victims of sexual assault in the military. One of the most emphasized recommendations was the need for a single point of accountability for sexual assault policy within the DOD, as such entity did not exist at the time. With the approval of the DODI 6495.02, the SAPR Program was made permanent as the single point of authority for ensuring all elements of sexual assault policy complies with the Military Services.

2.1.2. DOD SAPRO Mission & Responsibilities

The goal of the DOD SAPRO is to work towards "a culture free of sexual assault, through an environment of prevention, education and training, and response capability" that provides care that is gender-responsive, culturally-competent, and recovery-oriented (see DODI 6495.01, pgs. 2-3). Within this policy, two integral roles in sexual assault prevention were

established: the Sexual Assault Response Coordinator (SARC) and the SAPR Victim Advocate (VA) (see DODI 6495.01, pg. 3). SARC's serve as the single point of contact for coordinating appropriate and response care for sexual assault victims. Thus, when a report is administered, SARCs will be called to perform victim care and response. Similarly, SAPR VA's provide non-clinical intervention and support, such as sharing resources and available options, for adult sexual assault victims (see DODI 6495.01, pg. 3).

2.1.3. DOD SAPRO's Key Policies

In 2017, the DOD SAPRO established the DODI 5505.18 to provide specific procedures for the investigation of sexual assault within the DOD. Reports of sexual assault are initiated by military criminal investigative organizations (MCIOs), in partnership with other DOD law enforcement entities. Currently, servicemembers have two options to report an incident of sexual assault: Restricted and Unrestricted reporting (see *Figure 1* below).
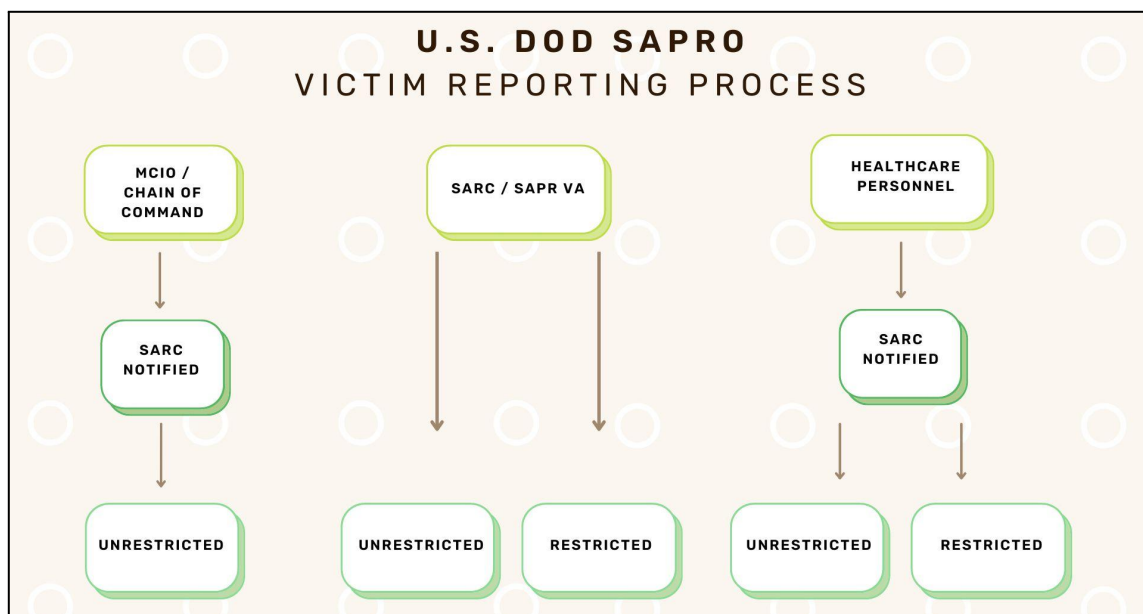
Figure 1. U.S. DOD SAPRO Victim Reporting Process

Restricted reporting is confidential; the survivor can access healthcare, advocacy services, and legal services without the notification to the command or law enforcement of the sexual assault. In contrast, Unrestricted reporting reports the sexual assault to both the command and law enforcement (see *Figure 2* below).

Figure 2. U.S. DOD SAPRO Care Recovery Services

Additionally, the Catch a Serial Offender (CATCH) Program is an opportunity for victims of sexual assault to make a Restricted report to aid in catching repeat offenders (DOD, 2020). Refer to *Table 1* below for other key policies and strategies for SV prevention within the DOD SAPRO.

Table 1. DOD SAPRO's Key Policies

Policy No.	Key Objective
DODI 6495.01-2 "Sexual Assault Prevention and Response (SAPR) Program"	Establishes procedures for responding to military sexual assault, including requirements for victim advocacy, healthcare, training standards, and monthly case management groups.
DODI 6495.03 "Defense Sexual Assault Advocate Certification Program (D-SAACP)	Establishes procedures to ensure all personnel providing advocacy services to victims of sexual assault hold professional credentials in victim advocacy.
Catch a Serial Offender (CATCH) Program	Provides victims who confidentially file a Restricted Report of sexual assault about their alleged offender or incident into the CATCH system to identify serial offenders.
Prevention Plan of Action (PPoA 2.0)	Outlines prevention efforts at each echelon of the military environment; identifies key military stakeholders and resources that make up the system needed to improve

	prevention efforts.
DOD Retaliation Prevention and Response Strategy (RPRS)	Protects retaliation among Active Duty, Reserve, or National Guard Service members who report a crime of SV while performing Active Service or Inactive Duty.
DOD Plan to Prevent and Respond to Sexual Assault of Military Men	Establishes empirically-based and gender-specific prevention techniques to protect military men from sexual assault.

2.1.4. Barriers to Reporting

Fear of retaliation is a common barrier when reporting crimes of SV, especially in the military given the hierarchal climate of the institution. Many victims are fearful of further abuse from their perpetrator, superiors, or peers. Data from a DOD survey from 2012 to 2014 indicates about 62% of women who filed an Unrestricted report experienced some form of retaliation (DOD, 2016). To encourage individuals who experience sexual assault to report the act to leadership, the Retaliation Prevention and Response Strategy (RPRS) aims to provide safety to individuals, including servicemembers, witnesses/bystanders, and first responders, who may experience retaliation after reporting SV by implementing a 5-step plan: (1) standardizing definitions, (2) improving data collection and analysis, (3) building supportive systems of investigation, (4) providing comprehensive support to reporters, and (5) creating a culture that is intolerant of retaliation. This is the first step in instilling confidence in the military's sexual assault prevention and response process.

2.1.5. The Gap

In terms of reporting an incident of adult sexual assault while deployed on military operations, there is an identified gap in existing policy or procedure to streamline reporting. This is an alarming gap in the military system as many servicemembers, particularly women, are at an increased risk for sexual assault while deployed overseas. Thus, the project aims to fill this gap in the system by integrating the *IP2* to facilitate documentation of SV in international contexts.

2.2. Military Branches Sexual Assault Programs

In addition to the DOD-wide and SAPR policy, all military branches are required to establish their version of SAPR programs. Refer to *Table 2* below that summarizes each of the Military Services' programs.

Table 2. Military Services Sexual Assault Prevention Programs

Branch	Program Name	Program Goal
Army	The Sexual Harassment/Assault Response and Prevention (SHARP) Program (ARMY, n.d.)	To prevent sexual harassment and sexual assault before they occur. The goal of this program is to reduce incidents of sexual harassment and sexual assault by creating a climate of trust and one that respects the dignity of Army members.
Marines	The Henderson Hall's Sexual Assault Prevention and Response Program (MARINES, n.d.)	To provide 24/7 support and advocacy to all Marines, Sailors, and military dependents over the age of 18 through awareness, education, and training of the prevention of sexual assault.
Navy	The U.S. Navy's Sexual Assault Prevention and Response (SAPR) Program (NAVY, 2022)	To respond and prevent sexual assault by eliminating it from our ranks through a balance of education, integrated response, compassionate advocacy, and adjudication to prompt respect and trust, while preserving Navy readiness.
Air Force	The U.S. Air Force's Sexual Assault Prevention and Response (SAPR) Program (AIR FORCE, n.d.)	To promote sensitive care and confidential reporting for victims of sexual assault and increase accountability for perpetrators who commit these crimes through awareness and prevention training, education, advocacy, and response.
Space Force	The 45th Space Wing's SAPR Program (SPACE FORCE, n.d.)	To educate, advocate, and collaborate to respond to and prevent sexual harassment and sexual assault as well as its harmful effects on members of the Space Force Base and Station.
Coast Guard	The Sexual Assault Prevention Response and Recovery (SAPRR) (COAST GUARD, n.d.)	To eliminate sexual assault from the U.S. Coast Guard by providing victim support, responsive and intimidation-free reporting, holistic care and recovery for victims, and accountability for perpetrators who commit these crimes.

2.3. IP2 Background

SV is often part of the tragic and brutal pattern of criminal acts committed during armed conflict and in the context of mass atrocities, affecting hundreds of thousands of people worldwide. Thus, the UK spearheaded the development of the *IP2*. In 2014, the *IP2* launched at the Global Summit on Ending Sexual Violence in Conflict (GSESVC), which brought global attention on the crime of SV. The UK has since translated it into several languages and has developed a set of training materials to support its use, and it has also begun a program of implementation in a few countries such as Colombia, Iraq, Uganda, and Bosnia. The *IP2* has since been revised to version 2.

With efforts from both the UN and UK Foreign & Commonwealth Office, the *IP2* serves as a tool to provide best practices on how to document, investigate, and promote accountability of SV as a violation of international criminal law. Within this specific protocol, crimes and violations related to SV are referred to as conflict and atrocity-related sexual violence (CARSV). The *IP2* is not state binding; it can serve as an aid to support national and international efforts to protectively and effectively document CARSV.

The *IP2* aims to focus on the documentation and investigation of CARSV under international criminal law, by including practical advice, checklists and sample questions for fieldworkers. Documentation, in this context, refers to systematically gathering information on CARSV that may identify a violation of international law. The protocol can be used by any practitioner who is documenting CARSV for the purposes of securing or supporting accountability for its survivors. Practitioners include non-governmental organizations (NGOs), civil society groups, international and national authorities, international and human rights investigators, and clinicians with expertise in treating victims of SV (see *Table 3* below for an overview of the tool).

Table 3. IP2 Overview

Part I	Outlines what *IP2* is, who can use it, and its various purposes.
Part II	Overview of CARSV and its relationship to gender-based violence and gender inequality; the detrimental consequences associated with SV; the obstacles faced by survivors when reporting.
Part III	Overview of information of SV under international law, through accountability avenues, individual vs. state responsibility, and reparations.
Part IV	Outlines requirements for practical documentation of CARSV; strategies that practitioners may employ to mitigate possible risks associated with SV (i.e., risk assessments, obtaining informed consent, confidentiality).
Part V	Procedures for gathering information and how to conduct safe and

	effective interviews; the requirements necessary when gathering, handling, and storing evidence of CARSV.
Part VI	Ways to organize, evaluate, and strengthen evidence gathered related to CARSV.
Part VII	Highlights issues that require sensitivity and attention to detail when documenting CARSV.
Part VIII	Outlines considerations to consider when reporting, submitting, or using CARSV information.

2.3.1. Methodology of IP2

The *IP2* focuses on collecting and documenting information on SV primarily through victim interviewing and testimonial evidence obtained from these interviews (see *Chapter 11* in *IP2*, pgs. 162-185). After obtaining informed consent, interviews are conducted by trained practitioners who have experience working with survivors and witnesses of SV.

IP2's basis for interviewing ensures that trained personnel work with survivors in order not to re-traumatize them of the crime; therefore, the quality and reliability of the information given is not biased or inconsistent. Accurate recording of the events is especially imperative, otherwise it can negatively impact survivors'/witnesses' credibility during legal proceedings. Interviews are conducted in a private, safe, and culturally-appropriate setting with only authorized and trained practitioners present. Practitioners aim to ask open-ended questions or leading questions to obtain detailed recounting of events, such as details of the assault, location and date of the assault, description of perpetrator or others present during the assault, etc.; this is to adopt a chronological structure of the story for clarification and credibility. Furthermore, the chapter ends by providing example questions to ask, what not to say to a survivor, and how to deal with inconsistencies in stories.

Forms of documentation include processing documents, processing sites of violations, photographing, video recording, and sketching sites of violations. The storage and handling of sensitive information is both organized in a manual storage and digital storage system where access is only granted to authorized personnel (see *Chapter 12* in *IP2*, pgs. 186-201).

2.3.2. Types of Evidence Collected in IP2

There are 4 types of evidence collected and analyzed within the *IP2*:
 (1) testimonial evidence, (2) documentary evidence, (3) digital evidence, and (4) physical/forensic evidence (see *Chapter 10* in IP2, pgs. 141-156).

Refer to *Table 4* for a breakdown of the forms of evidence collected.

Table 4. Forms of Evidence

Testimonial	Refers to the account of SV crimes collected via interviewing victims, eyewitnesses, insider witnesses, pattern witnesses, expert witnesses and suspects, which can be given orally directly in court, recorded in writing, or by audio/video recordings.
Documentary	Refers to physical material recording information in a written or documentary format. There can be official (i.e., military reports, medical certificates, police records, identity documents, etc.) and non-official documentary evidence (i.e., health records, records from religious leaders, newspapers, etc.) of SV.
Digital	Refers to any information or data that is stored on, received or transmitted by an electronic device through seizures, open source information, and browsing the internet (i.e., electronic health records, photos/videos of violations and injuries, social media, emails/texts, location information, etc.).
Physical	Refers to any physical objects (i.e., materials like clothing, weapons, physical injuries or biological/forensic material, toxicology reports, electronic items, etc.) that can provide relevant information to help establish that SV took place or provide a link between the crime and its victim or between a crime and its perpetrator.

METHODS & PROCEDURES

3.1. Theoretical Framework

The project aims to apply the Social-Ecological Model (SEM) (Bronfenbrenner, 1979; see *Figure 3* below). The SEM considers the interplay between the individual, interpersonal, community or organizational, societal or institutional levels to understand the variety of factors that put individuals at risk for violence and how to protect them from experiencing or perpetrating violence. The model posits that, in order to prevent violence, it is necessary to target multiple levels of the model simultaneously to create and maintain lasting impact.

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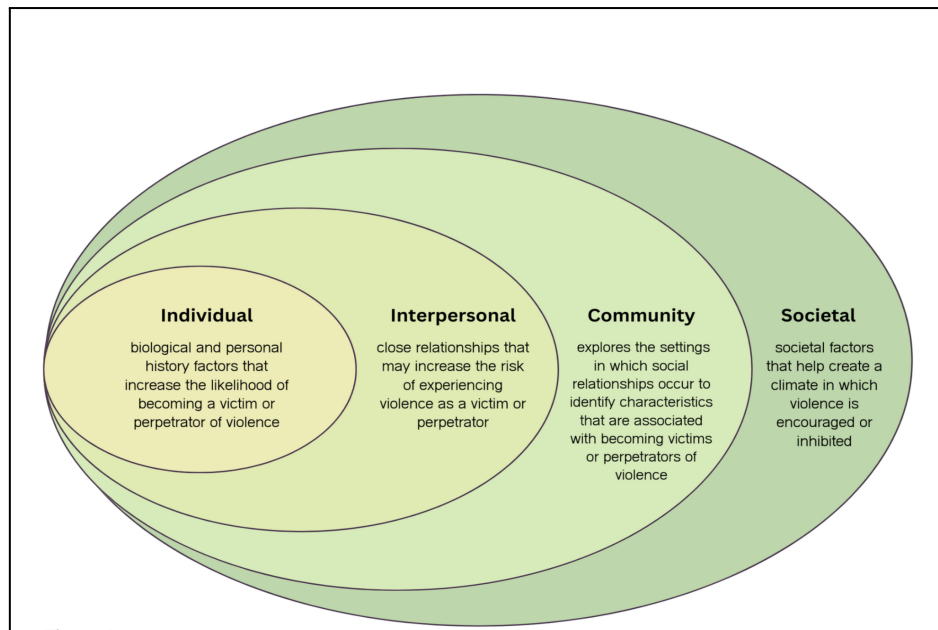
Figure 3. The Socio-Ecological Model of Prevention

The first level of the model is the **individual** level of prevention, which identifies biological and personal history factors that may increase one's likelihood of perpetrating violence or becoming a victim of violence. An example of individual level factors are age, education level, income status, alcohol and substance abuse history, or history of violence. Prevention strategies aim to educate attitudes, beliefs, and behaviors that prevent violence, through means such as conflict resolution, skill-building, and safe dating and healthy relationships.

Next, the second level of the model is the **interpersonal** or **relationship** level of prevention, which investigates how close relationships, such as peers, partners, and family members, may influence one's likelihood of experiencing violence as a perpetrator or victim. Prevention strategies are designed to encourage positive peer norms and promote healthy relationships through parenting or family-based prevention programs.

Next, the third level of the model is the **community** or **organizational** level of prevention, which examines settings like schools, neighborhoods, and workplaces, in which social relationships occur. This level aims to identify setting-related factors that are associated with becoming victims or perpetrators of violence. Prevention strategies target the physical and social environment by creating safe places where people work, learn, and play and by addressing the root causes that give rise to violence in these communities.

Lastly, the fourth level of the model is the **societal** level of prevention, which explores the broad level societal factors that influence the climate in which violence is encouraged or inhibited. An example of such factors include sociocultural norms that support violence to as an acceptable form to resolve conflict and thereby perpetuate violent behavior as well as economical and social inequities between groups. Prevention strategies discourage harmful

social norms that promote violence and strengthen the factors that influence the social determinants of health (i.e., health, economics, education, employment).

For the purposes of the program, this model will consider how the adaptation of *IP2* will impact prevention at all levels within the DOD SAPRO and Military Services (i.e., DOD SAPRO → Military Services → Individual Installations).

3.2. Data Eligibility Criteria

The project considered studies that were empirically integrated (i.e. mixed methods, qualitative, or quantitative design), conducted via pilot studies, and systematically reviewed or critiqued *IP2* nationally and internationally.

The project will also include articles whose target population include cases of SV in international contexts. There is no restriction on the methodology or sample of the articles to ensure a broad scope of articles. For the purposes of this study, the author aims to only include articles looking into heterosexual relationships among this group, and those who identify as LGBQ will be excluded from the study. Similarly, included articles will investigate constructs that are alike to CARSV such as intimate partner violence (IPV), domestic violence (DV), and gender-based violence (GBV); specifically, the author aims to identify existing literature focused on how the *IP2* has been integrated in other countries.

3.3. Data Source

The methodology included a qualitative systematic analysis of existing literature that implements *IP2* to prevent CARSV. The review identified manuscripts and publications from a range of research databases, including but not limited to PsycINFO, Psyc Articles, PubMed, Medline, Women's Studies International, Psychiatry Online, CDC, the DOD, the UN, and other international government organizations. The search also included gray literature, reports, and unpublished research to limit restrictions as this topic is not well-researched. The databases and resources were accessed through Georgia State University's online research library. In the absence of studies, articles, or existing programs integrating *IP2*, which is possible as there is a paucity of research related to this documentation, the author looked into the aforementioned databases, searching descriptive studies, systematic reviews, and/or meta-analyses that look into CARSV adjacent protocols to provide a basis of survivors experiences to inform future CARSV interventions.

3.4. Data Collection

Data was gathered through keywords and their synonyms related to SV, CARSV, or violence against women in international contexts, or any related terms based on the *IP2*. The purpose of this review was to explore existing implementations of the *IP2* in international contexts to identify potential strengths, weaknesses, and adaptations to inform the program's integration to the DOD SAPRO. Thus, the intended population to benefit through this program

adaptation are active-duty servicemembers overseas on military operations. There are no restrictions for other demographic characteristics or specific settings. For example, within the PsycINFO database, the following keywords will be used: conflict-related SV; intimate partner violence; domestic violence; gender-based violence; risk and protective factors military servicemembers; international SV; international protocol for SV; international violence against women; existing UK PSVI implementations." The eligible articles will be saved and be included in the review.

RESULTS & DISCUSSION

4.1. Data Synthesis

After the UK government launched the Preventing Sexual Violence in Conflict Initative (PSVI) in 2012 (UK Foreign & Commonwealth Office, 2014), CARSV has been a topic of international concern and major efforts have been pursued to combat this human rights violation. Alarmingly, there is a lack of concrete data on the prevalence and incidence of CARSV as unique risk and protective factors vary greatly from country to country. Therefore, a review of the literature resulted in limited implementations of the *IP2*. A few countries such as, Iraq, Sri Lanka, Myanmar, Guatemala, Kosovo, and a group of African countries, have integrated the *IP2* to fit the needs of their specific country. See *Table 5* below for a summary of objectives for five country case studies that have administered the *IP2* to target CARSV. To date, the PSVI budget has surpassed £34 million based on projects in 24 countries, with most of the budget going towards justice and accountability (Independent Commission for Aid Impact, 2020).

Table 5. Five Country Case Studies Implementing IP2

Country	Objectives
Central African Republic, 2018	- Provides background related to the SV context in CAR - Provides an overview of national, hybrid and international accountability mechanisms available in and outside CAR - Compares CARSV with 'ordinary' SV crimes to compare elements of crimes and understand legislative gaps - Gives insights on on types of SV evidence in CAR
Columbia, 2020	Addresses CARSV among males and LGBTI+ individuals
Iraq, 2018	- Provides background related to the SV context in Iraq - Emphasizes differences between the international criminal law and the law, procedure and practice in or relevant to Iraq
Myanmar, 2018	Addresses the context for and characteristics of CARSV most

	apparent in Myanmar
	● Describes the landscape for legal avenues for justice within Myanmar and at the international level
	● Highlights specific evidential and procedural requirements and practice issues that may arise when documenting CARSV in Myanmar
Sri Lanka, 2018	● Provides the context for and characteristics of CARSV most apparent in Sri Lanka
	● Describes the landscape for legal avenues for justice within Sri Lanka
	● Identifies specific evidential and procedural requirements and practical issues that may arise when documenting CARSV in Sri Lanka

4.1.1. Scientific Implementations of the IP2

There exists little scientific implementation of the *IP2*. However, the most recent was conducted in 2021 by Komar and colleagues. The study utilized the *IP2* in a pilot study involving 20 victims of CARSV in the Democratic Republic of the Congo (DRC). The incidence of CARSV in the DRC, particularly the Kasai region, has escalated since 2016 as a result of rebel militias and governmental forces (UN, 2018). Thus, local investigators utilized the forms in the *IP2* to document cases of SV in the Kasai region. In addition, the study compared the *IP2* to another protocol developed by the Medicins Sans Frontier (MSF), and identified the *IP2* as superior in all aspects than the MSF. Of the strengths, the study highlighted *IP2*'s ease-of-use and comprehensive documentation of CARSV to be a major advantage. Of the limitations, there are few resources available to victims of CARSV in DRC, thus, it is challenging to integrate the *IP2* in other conflict zones.

4.1.2. Critiques of the IP2

The final two articles found are critiques of the *IP2*. First, Helen-Maras & Miranda (2017) critically examine if the documentation gathered from the *IP2* is sufficient evidence to ensure admissibility in national and international courts. Given the international nature of the *IP2*, this article establishes a foundational understanding of the special evidentiary rules related to SV that exist in international courts. Therefore, it is necessary information to inform the adaptation of the *IP2* to the U.S. military with the U.S. criminal justice system in mind.

The first rule states that victim testimony is not required in criminal proceedings, which deviates from most domestic rules of admissible evidence (Helen-Maras & Miranda, 2017). The other unique rules state that non-consent of the victim is implied when SV occurs during conflict and does not need to be established and lastly, the victim's prior sexual conduct is not

necessary to be admitted in court (Helen-Maras & Miranda, 2017). The latter two rules were passed to prevent revictimization and reduce trauma for the survivors during trials. Interestingly, however, many of these omitted facts in international court settings can be introduced in national criminal courts as admissible evidence. Specifically, the issues relate to the victim's sexual history and consent. This is because many of these special evidentiary rules have not been widely adopted in national courts; this is alarming as international courts only prosecute the most serious international crimes and many SV cases are not dealt with in international courts (Hindle, 2017; Ward & Marsh, 2006). Thus, victim testimony of the incident is not sufficient evidence in national courts and other corroborative evidence is needed to prosecute SV cases (i.e., eyewitness testimony, medical records, physical/digital evidence, confessions, etc). Therefore, the current practices of forensic evidence for prosecuting incidents of SV are an impediment to combating this issue; therefore, many perpetrators can evade prosecution for these crimes. This is due to the lack of clarity about what evidence should be collected to support criminal processes; the WHO (2013) identified three challenges in evidence collection, including knowledge gaps, resource constraints, and system weaknesses such as insufficient guidelines and standards for documentation.

Lastly, Lamphere-Englund (2016) critiques the *IP2* and establishes that it lacks guidelines, which, in turn, will have potential negative consequences for survivors of SV. Many of their major critiques of the *IP2* involve it not being survivor-centric or inclusive of male and non-female victims, recommendations for PTSD and trauma from the assault, and issues of temporality and memory when recounting the incident. Thus, the main weaknesses proposed by Lamphere-Englund are taken into consideration with the creation and adaptation of this program to the DOD SAPRO.

4.1.3. Summary of Strengths & Weaknesses

Overall, the review of literature indicates a paucity of long-term interventions that aim to address the deep-rooted causes of SV. Many of the UK's PSVI projects are subject to one-year funding cycles, thus there is only capacity for short-term fixes. Another weakness is there is little to no room for survivor input in program design or implementation, and research shows high success in interventions when community-based participatory research (CBPR) is utilized. Lastly, there is a lack of infrastructure in many countries to fully integrate the *IP2*, including unified documentation of physical and digital evidence, financial resources to conduct such investigations, and trained personnel with knowledge and skills in SV response to conduct the documentation and analysis. In light of the major limitations, the *IP2* is an integral foundational document that will continually adapt to fit the needs of the climate.

POLICY & PROCEDURE ADAPTATIONS

5.1. The Policy

Currently, there are limitations to existing methods when reporting incidents of sexual assault for servicemembers. However, no such policy exists for reporting sexual assault for

active-duty members deployed overseas without any barriers with collecting evidence or fear of retaliation. The current project aims to fill this gap in the system by integrating the *IP2* to facilitate documentation of SV while deployed on military missions in international contexts. Current DOD SAPR policy exists to highlight the procedures for sexual assault reporting. SAPR, for example, collects evidence through Sexual Assault Forensic Examination (SAFE) kit. However, there are temporal limitations to this method that may deter survivors from reporting the incident. Another key policy within SAPR is within the RPRS Program that aims to protect active-duty servicemembers from retaliation when reporting an incident of sexual assault.

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The revised policy titled, "*RPRS IP2 Program*" aims to incorporate the *IP2* to fill in the gap within current DOD SAPRO SAPR policy. Key policies such as the "DODI 6495.02: Sexual Assault Prevention and Response (SAPR) Program" and the the "DOD Retaliation Prevention and Response Strategy" establish procedures for responding to and preventing SV in the military. The SAPR program does this through victim advocacy, healthcare resources, training standards, and monthly case management groups.

Furthermore, the current RPRS Program aims to protect active-duty and Reserve servicemembers who experience SV from retaliation when reporting. With these two policies in mind, the *IP2* will be an added component within the RPRS and SAPR policies to facilitate streamlining reporting efforts within the DOD SAPRO as well as the Services. Despite the *IP2*'s limitations as determined by the review of the literature, there are substantial benefits that will provide retribution to survivors.

5.1.1. Policy Purpose

The **purpose** of this issuance is to establish guidelines to integrate the *IP2* within key DOD SAPR policy to assign responsibilities to ensure policy implementation **removes barriers of reporting** SV among active-duty servicemembers deployed on military operations.

5.1.2. Policy Goal

The **goal** of *RPRS IP2 Program* is to integrate a component of the *IP2* to the DOD SAPRO's SAPR Program to encourage reporting of SV among active-duty servicemembers deployed overseas.

5.1.3. Policy Objectives

1. Establish full oversight and direction of *IP2* within DOD SAPRO and appoint leadership to facilitate communication and messaging to the Military Services to maximize strengths and contributions of all stakeholders.

2. Ensure policy guidelines are followed to establish activities to prevent SV are structured to support long-term impact through effective design, monitoring and evaluation of implementation.

3. Adapt *IP2* to be survivor-centric and survivor-led to empower community engagement and unit cohesion to improve the climate of the military.

4. Engage in a systematic/socio-ecological lens into programming activities to ensure effective dissemination and uptake across the DOD SAPRO and Services.

5.1.4. Policy Adaptations

As established in the review of the literature, there are limited existing implementations of *IP2* - with the exception of a few countries (see *Table 5* above). There are possible explanations as to why the *IP2* has not been adopted widely. For example, countries not having the capacity or bandwidth to implement long-term interventions that address the root causes of SV. Other critiques identified a lack of survivor-centric language and input from survivors themselves. Despite these weaknesses, the *IP2* will **benefit** the DOD SAPRO and Military Services, by improving accountability options available for survivors when reporting sexual assault.

Therefore, the current policy aims to mitigate these weaknesses by adapting the *IP2* to fit the needs of the military context.

Current adaptations to the *IP2* are considered below:

- **Legality to match the U.S. Federal Laws**: Given the *IP2* is a tool created for the international context, the tool will be adapted to represent the federal laws. The *IP2* is a tool developed by the United Nations and based on international criminal law procedure. Therefore, the revised policy within DOD SAPRO will reflect the laws of the U.S. federal context related to prosecution.**Cultural and environmental adaptations:** The *IP2* is typically utilized in nongovernmental organizations (NGOs), clinical, and human rights/national authorities. However, the tool is universal to be applied to other organizations like the U.S. military. The *IP2* will be adapted to match the worldview of military culture. The *IP2* will consider the specific diction and hierarchical knowledge of the military.
- **Training appropriate personnel:** There will be trained personnel who are familiar with military culture to facilitate the *IP2* procedures.
- **Survivor-centric protection options:** Given the hierarchical nature of the military and the fear of retaliation when reporting to leadership, there will be protection from retaliation for survivors when providing Restricted and/or Unrestricted reports by incorporating the types of evidence collected by the *IP2* documentation process to ensure prosecution as a potential option if the survivor chooses.

5.2. Example of Stakeholders & Partners

For the purposes of this project, there are two groups of stakeholders. The first group includes stakeholders that will have direct contact with sexual assault survivors. The second group of stakeholders are community members who aid in the development of this policy by providing financial resources, political support, or other types of resources needed. Stakeholders will participate in a needs assessment process to highlight project improvements and needs.

Stakeholders with direct contact with survivors are law enforcement, medical personnel who specialize in sexual assault treatment, community-based service providers, legislative institutions. Key community partners that will aid in the success of this program are government officials, policymakers, researchers, funders and philanthropists, and community-based leaders. Refer to *Table 6* for a list of key stakeholders for this program.

Table 6. List of Stakeholders and Community Partners

Stakeholder	Insight or Expertise	Interest or Perspective	Role in the Program Development Process
Sexual Assault Prevention and Response Office (SAPRO)	Eliminate sexual assault from the military	A broad perspective on accountability and oversight to enable military readiness	Serving on planning team as a domestic advisor; analyzing data and disseminating results
Military Services (Army, Marines, Navy, Air Force, Space Force, National & Coast Guard)	Conducting military operations for the reason of maintaining peace and order	An individual perspective on the impact of SV within specific branches and unique installations	Integrating training and resources for sexual assault; collecting data for on program efficacy
Department of Veteran Affairs (DVA)	Providing treatment for mental and physical health conditions related to military sexual trauma	An interest in promoting the accessibility and availability of military sexual assault treatment during and after deployment	Providing care, treatment, and support for afflicted deployed survivors who are exposed to combat or sexual assault
Office of Military Affairs (OMA)	Deploying effective military capability in peacekeeping missions	An interest in international security, military operations,	Serving on the planning team as an international advisor; provide insight

		defense strategy and trade	on adaptation of the International Protocol
The Department of Peace Operations (DPO)	Maintaining international peace and security for Member States and the Secretary-General	An interest in maintaining international peace and preventing conflict around the world	Serving on the planning team as an international advisor; provide insight on adaptation of the International Protocol
United States Mission to the United Nations	Maintaining responsibilities for the U.S. Delegation to the United Nations	An interest in the United States Mission on military and security aspects of United Nations peacekeeping operations	Serving on the planning team as an international advisor; provide insight on adaptation of the International Protocol

5.3. Example Budget Allocation

The DOD SAPRO is responsible for deterring adversaries and defending the U.S. homeland and its citizens. Thus, the DOD's Fiscal Year (FY) 2023 budget invests in this country's citizens, priorities, and purposes that will support the U.S. efforts to advance our defense and respond to the current state of sexual assault in the military. Specifically, the DOD is investing in significant resources to create mandatory change. The mission of this year is **prevention**. Prioritizing prevention and cultural change of this magnitude is an ongoing endeavor.

Therefore, the President's FY23 Budget request includes over $1.1 billion for sexual assault prevention and response programs, including more than 2,400 personnel to implement the recommendations of the IRC. The proposed budget cost for integrating and adapting IP2 within DOD and each of the Services is described below.

The budget will reflect efforts such as the development of IP2 trainings, curricula related to prevention, an integrated IP2/prevention workforce with trained personnel, as well as implementation efforts and evaluation surveillance after the policy has been enacted within each Service.

Table 7. DOD Total Budget by Military Department (in millions)

Total Budget	**FY 2023**	**FY 2022**	**Δ FY23 - FY22**

Army	277,332	272,734	4,598
Navy	130,901	111,721	19,180
Air Force	134,122	112,764	21,358
Marines	270,321	250,332	27,989
Space Force	98,021	90,211	7,810
Defense-Wide	136,780	117,780	19,000
TOTAL	**1,100**	**915,000**	**99,935**

5.4. Multiple Levels of Prevention

With the SEM in mind, the adaptations will consider how to combat SV through a socio-ecological lens. Refer to *Figure 4* for these considerations and *Figure 5* for steps on how the policy aims to target the multiple levels.
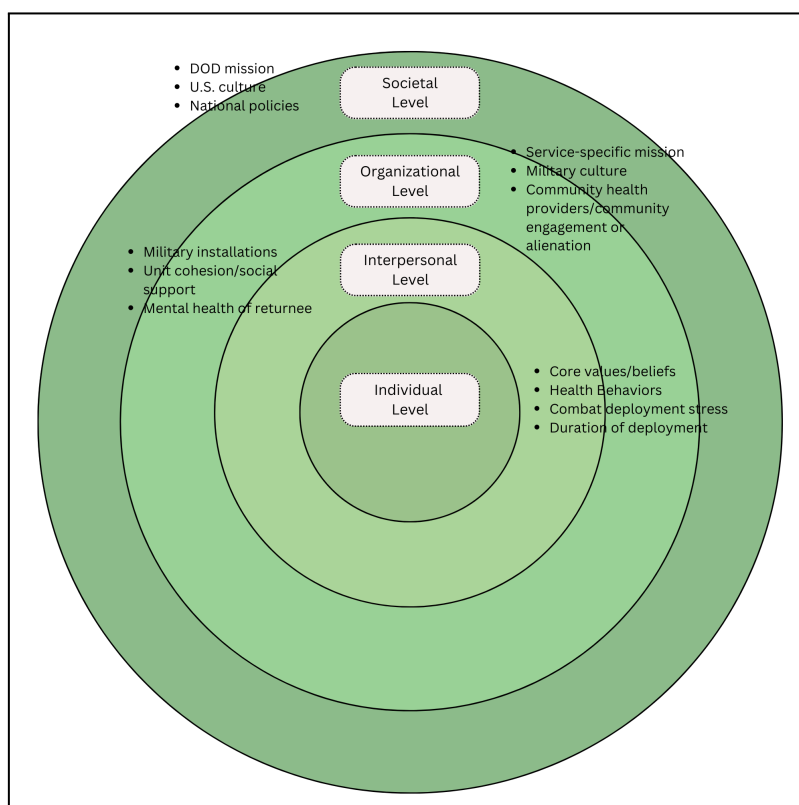

Figure 4. SEM Framework

First, at the **individual** level, *IP2* will impact core values and beliefs, health behaviors, combat deployment stress, and the duration of deployment. Next, at the **interpersonal** or **relationship** level, *IP2* will impact military installations, unit cohesion and support, and the mental health of returnees. Next, at the **organizational** level, *IP2* will impact service-specific missions, military culture, community health providers, and community engagement or alienation. Lastly, at the **societal** level, *IP2* will impact the DOD mission, U.S. culture, and national policies related to sexual violence.
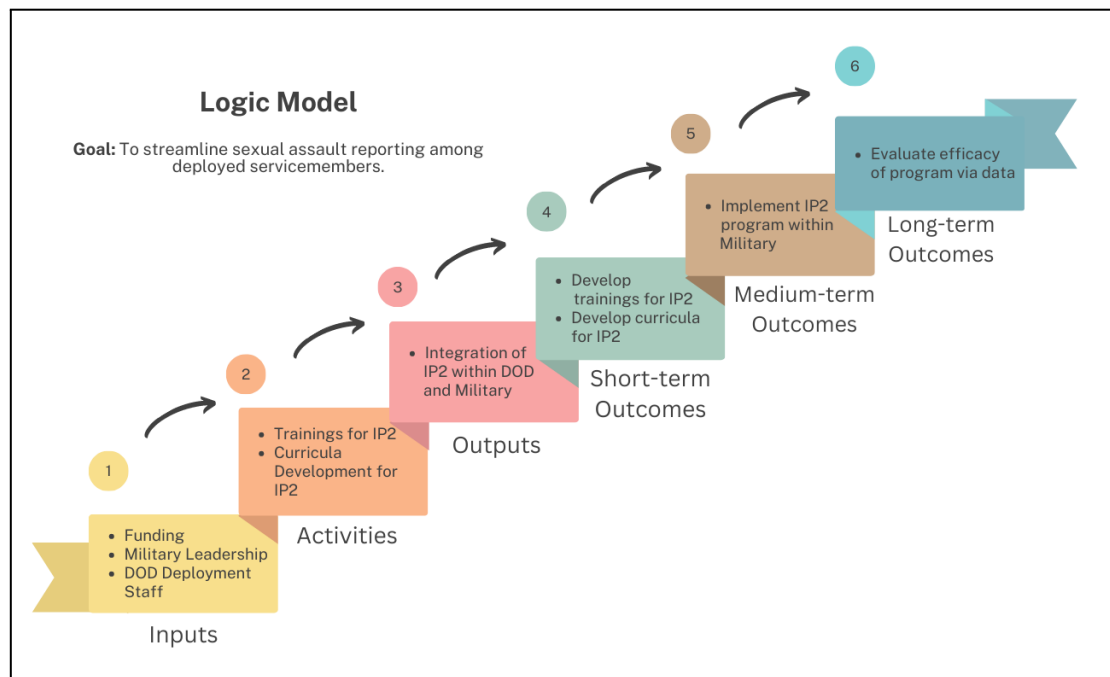
Figure 5. Logic Model for IP2 within DOD SAPRO and Military Services

CONCLUSIONS

Military sexual assault is a pervasive issue that affects millions of servicemembers across all branches. Currently, there is a gap in SAPR policy to streamline reporting for servicemembers deployed on military operations. Therefore, the purpose of this program is to integrate the *IP2* to the DOD SAPRO and Military Services. There are limited existing implementations of *IP2*. However, despite these weaknesses, the implementation of the *IP2* will **benefit** the DOD SAPRO and Military Services, by improving accountability options available for survivors when reporting sexual assault. The project aims to incorporate the following adaptations to fit the needs of the military context: (1) legality to match the U.S. Federal Law, (2) cultural and environmental adaptations, (3) training appropriate personnel, (4) survivor-centric protection options.

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APPENDIX

A. Example of Timeline

The timeframe of each activity ranges from as frequently as three days a week, and the least frequent being bi-monthly. It is important to note that the timeline above is meant to serve as a generalized template and is thus subject to potential adjustments on a case-by-case basis. The co-director from the DOD SAPRO and co-director from the UN will take charge of overseeing everyone's respective ability to execute each activity efficiently and effectively, based upon each team member's experience level and their responsibilities. Through this, our aim is to fully utilize each of the program's team members in a collaborative effort to bring in resources vital to creating a meaningful impact on our beneficiaries. In the event of problems, through proper planning and following the steps laid out prior, our team will be prepared for any potential unexpected issues encountered during the policy implementation.

Table 8. Program Implementation Timeline

Activities	January	February	March	April	May	June	July	August	September	October	November	December
Program Design	▓	▓										
Training		▓	▓									
Program Pilot			▓	▓								
Program Assessment					▓	▓						
Implementation							▓	▓	▓	▓	▓	▓
Evaluation											▓	▓

B. Example of Policy Evaluation Plan

Our project will use data to improve the dissemination of our strategy by analyzing the results and implementing the necessary changes. For example, if we are interested in knowing the impact of servicemembers utilizing local resources, we would create an online survey asking questions related to utilizing those resources and the impact of those resources. Once the data is collected, we would translate it into a palatable measurement such as "the rate of servicemembers that utilized resources and their effectiveness." Based on the feedback of the collected results, we can determine whether to create new initiatives to encourage servicemembers to utilize resources; we could incorporate the resources into our teaching strategy or even include the community resources as contributors/sponsors that we partner with in the creation of our strategy. These would ensure that the resources are utilized by the servicemembers in the future.

Evaluation data will be used to sustain the implementation of this strategy through timely, recurring evaluation that assures that the policy has been implemented with fidelity and can provide measured outcomes on the success of the predetermined outcomes. Collecting pre/post data, meeting/appointment logs, intercept surveys, and conducting focus groups and interviews are all ways to collect evaluation data throughout the time the policy is enacted. Site implementation teams will meet regularly and respective site community advisory boards regularly to establish constant communication for check-ins and updates. This data can guide most decisions about the policy. It can let implementers know what areas of the project may need more resources, what areas may need adapting, and if there is unprecedented success in a certain area–all useful information. Identifying "lessons learned" is a way that evaluators can assess which parts of implementation may need additional attention and support. The data collected will be used to support decisions about implementation.

Table 9. Program Evaluation Plan

Evaluation Question	Measures & Assessment	Data Sources & Collection
Dissemination		
What elements inhibited proper dissemination?	The total number of dissemination adversities	Focus groups and interviews with implementation teams across sites; log of adverse events and incidents

What elements facilitated dissemination?	List of supporting elements at each site	Focus groups and interviews with implementation teams across sites
Adoption		
What are the most important characteristics to identify in choosing which communities adopt the *IP2*?	Community needs assessment	DOD SAPRO to hold meetings with implementation teams of potential communities
What capacities are needed by community organizations to adopt *IP2* in their communities?	Site budget, list of the necessary personnel, and local partnering resources	DOD SAPRO to generate financial and source demand of strategy dissemination and implementation
Adaptations		
What type of adaptations were made most often across sites implementing the *IP2*?	The number of each type of adaptation from all sites	Site implementation teams will keep logs of adaptations and report them monthly to DOD SAPRO
How will adopters and implementation teams know when adaptations are necessary?	The number of adversities or challenges at each site	Form community advisory boards across sites that meet quarterly
What was the financial impact of program adaptations?	Additional costs from program adaptations	Site implementation teams will report expenses quarterly to DOD SAPRO
Implementation		
How long does the implementation process take?	Rates and growth timeframe within the participating communities	Site implementation self-report assessments and focus groups

How can implementation be improved?	The number of adversities in implementing the International Protocol at each site	Focus groups across implementation sites; community advisory board meetings quarterly
How many communities/sites successfully implemented the *IP2*?	The number of sites implementing the program for 12 months or more, number of participating families at each site	Self-report from site implementation teams to DOD SAPRO
Public Health Outcomes		
How many servicewomen were connected to sexual assault resources from the *IP2*?	Rate of participating servicemembers that were recommended to a resource	Self-report from participating servicemembers through the online survey
How many servicemembers utilized local resources recommended to them?	Rates of participating servicemembers that used resources	Self-report from participating servicemembers through online surveys
What skills, behaviors, and/or practices did servicemembers embrace?	List and frequency of skills, behaviors, and/or practices	Self-report from participating servicemembers through online surveys; interviews with participating servicemembers

C. Example of Revised Policy (DODI)

Department of Defense INSTRUCTION

SUBJECT: DOD Retaliation Prevention and Response Strategy (RPRS) International Protocol v2 (DOD RPRS IP2) Program

1. **PURPOSE**. This Instruction is composed of multiple volumes, each containing its own purpose. In accordance with the authority in DoD Directives (DoDD) 5124.02 and 6495.01 (References (b) and (c)):

a. This Instruction establishes and implements policy, establishes procedures, provides guidelines and model programs, delegates authority, and assigns responsibilities regarding the prevention of and response to sexual assault in the DoD.

b. This volume:

   (1) Reissues DoD Instruction (DoDI) 6495.02 (Reference (a)) to incorporate the *IP2* procedures (see Appendix in Reference ((d)).

   (2) Establishes policy and implements Reference (d) and assigns responsibilities and provides guidance and procedures for the DOD Retaliation Prevention and Response Strategy (RPRS) International Protocol v2 (DOD RPRS *IP2*) Program (see Appendix in Reference (d)).

   (3) Establishes the processes and procedures for evidence protocols as established in the *IP2*.

   (4) Establishes the multidisciplinary Case Management Group (CMG) (see Glossary) and provides guidance on how to handle sexual assault.

   (5) Establishes that the implementation of the *IP2* applies SAPR minimum program standards, SAPR training requirements, and SAPR requirements for the DOD Annual Report on Sexual Assault in the Military.