



UNITED STATES MARINE CORPS  
MARINE CORPS BASE  
CAMP LEJEUNE, NORTH CAROLINA 28542

BO 1754.1  
FSC:MES:pap  
7 Sep 1983

*Handwritten initials*

BASE ORDER 1754.1

From: Commanding General  
To: Distribution List  
Subj: Family Advocacy Program

Ref: (a) MCO 1752.3  
(b) BUMEDINST 6320.57 (NOTAL)  
(c) MCO 5510.7D  
(d) MCO 5355.1  
(e) MCO 5370.6A  
(f) MCO P5211.2A

Encl: (1) Definitions  
(2) Family Advocacy Committee Members  
(3) Report of Child/Spouse Maltreatment (MCBCL 1754)  
(4) Family Advocacy Program Staff  
(5) Case Management Stages  
(6) Family Violence Identification/Rehabilitation Statistical Report (MCBCL 1754/1)  
(7) Roster/Code for Roster of Child and Spouse Abusers (MCBCL 1754/2)

Reports Required: Report of Child/Spouse Maltreatment (Form MCBCL 1754) Report Control Symbol MCBCL 1754-01 (Refer to par 7d (1)a of the text)

Family Violence Identification/Rehabilitation Statistical Report (Form MCBCL 1754/1) Report Control Symbol MCBCL 1754-02 (Refer to par 7d(8)f of the text)

Roster of Child and Spouse Abusers Report (Form MCBCL 1754/2) Report Control Symbol 1754-03 (Refer to par 7d(8)f of the text)

1. Purpose. To publish implementing procedures for the Marine Corps Base, Camp Lejeune Family Advocacy Program.

2. Background. Department of Defense (DOD) policies on Family Violence require the development of a DOD-wide program for the prevention, identification, evaluation, treatment, follow-up and reporting of child abuse/neglect and spouse abuse. Reference (a) contains Marine Corps Family Advocacy guidelines, outlining responsibilities of Marine Corps personnel and directs the Commanding General, Marine Corps Base, Camp Lejeune, North Carolina to implement a Family Advocacy Program.

3. Scope

a. The Family Advocacy Program encompasses the elements of prevention, identification, assessment, jurisdiction, discipline and rehabilitation as they relate to child abuse/neglect and spouse abuse. Definitions relevant to the implementation of this order are contained in Enclosure (1).

b. The following categories of child and spouse maltreatment are considered:

- (1) Physical Abuse
- (2) Physical neglect of children (including abandonment)
- (3) Psychological and emotional abuse
- (4) Sexual abuse
- (5) Psychological and emotional neglect of children

c. Duty assignment considerations as discussed in paragraph 7d(5) of this order apply to:

- (1) Active duty personnel who are offenders
- (2) Active duty personnel whose family members are offenders
- (3) Active duty personnel whose family members are victims of sexual assault
- (4) Active duty personnel who are the victims of abuse or sexual assault

4. Objectives. The Family Advocacy Program provides a means through which the Commanding General, Marine Corps Base, Camp Lejeune, North Carolina can:

- a. Ensure that tenant personnel are aware of special needs of families involved in child/spouse maltreatment and of the services available.
- b. Ensure interagency, staff and command cooperation in addressing family violence matters.
- c. Use on and off-base resources in establishing preventive programs.
- d. Enhance unit readiness by establishing programs and policies that can restore families suffering from family violence to a healthy state.

5. Discussion

a. Professionals who have worked with military families have observed patterns that indicate which families can be categorized as "at risk", i. e., having potential for family violence. For example, most abusing/neglecting parents were themselves abused/neglected as children. Financial difficulty and drug/alcohol abuse are often contributing factors, and much abuse results from ignorance rather than malevolence. In the Marine Corps and the Navy, most reported incidents of family violence occur among the younger families. Considering the above factors, the Family Advocacy Program will be directed at awareness and education in the military community, to include development and implementation of programs that improve parenting skills, marital relations and stress coping skills among the identified group of "at risk" families.

b. Many Marine Corps and Navy personnel involved in family violence are solid performers on the job, and once identified as abusers and placed in a treatment program, can usually be persuaded to alter their behavior. When offenders in family violence cases are summarily punished or separated from the service, their victims perceive themselves as also being punished because of the emotional or financial difficulties that result. Therefore, subject to the gravity of the offense and the circumstances of previous military service, rehabilitation of certain offenders may be in the best interest of all concerned. When a balance of appropriate deterrent and rehabilitative options exists, the abuse often stops and the once abusive individual remains effective within the command.

6. Policy

a. Acts of child and spouse maltreatment are incompatible with the high standards of professional and personal discipline required of members of the United States Armed Forces.

b. Once identified, abusive Marine Corps and Navy personnel must be confronted and the appropriate disciplinary or administrative action taken. When justified by circumstances of positive previous performance, individual motivation, and positive rehabilitative potential, administrative action in the form of mandated rehabilitation is the preferred course of action.

c. Acts of child and spouse maltreatment occur within and affect the total family unit. Therefore, rehabilitative efforts will be directed at the total family, whenever possible.

7. Program Guidance/Action. The Commanding General, Marine Corps Base, Camp Lejeune is tasked with supporting tenant commands through a formal Family Advocacy Program. The program shall be as outlined herein. The Director, Family Service Center (FSC) has been designated as the Family Advocacy Program Officer and is tasked with the coordination of the program which includes the following elements:

a. Prevention

(1) General Information/Awareness. This will consist of a continuing public affairs effort to alert commanders and the military community to the phenomena of child and spouse maltreatment, the characteristics of the abuser and the abused, and the services available to help affected families.

(2) Education of "at risk" families. This will consist of courses offered to personnel preparing for marriage or parenthood, and courses offered to "targeted" groups; e. g., families of personnel who are deployed or who are in exceptionally stressful situations.

(3) Briefing for Key Personnel. The success of the program will depend upon coordination and cooperation among military and civilian agencies that deal with family violence. Periodic local briefings in identification, jurisdiction, evaluation, treatment and reporting procedures will be conducted for Commanding Officers and their staff and for personnel of the following agencies:

- (a) Command Chaplain's Office
- (b) Provost Marshal's Office
- (c) Staff Judge Advocate's Office
- (d) Child Care Centers
- (e) Naval Hospital
- (f) Camp Lejeune Dependent Schools
- (g) Family Service Center
- (h) Quad-Command and MCAS (H) New River Substance Abuse Control Center
- (i) Off-base law enforcement and social service agencies
- (j) Naval Dental Clinic
- (k) 2nd Dental Battalion, 2d FSSG

b. Identification and Assessment. Cooperation between law enforcement agencies, social service agencies, and medical facilities has traditionally been the best means for identifying and assessing child and spouse maltreatment incidents. Military and civilian members of the Camp Lejeune and New River communities (on and off base) must be encouraged to report incidents of suspected maltreatment to the Naval Hospital's Duty Family Advocacy Representative (DFAR).

(1) On-Base Incidents. When Naval medical personnel, Naval dental personnel, school officials, child care center personnel, Family Service Center Personnel and Military Police become aware of child/spouse maltreatment incidents, they will report these incidents to the Naval Hospital's Duty Family Advocacy Representative (DFAR) for assessment and further disposition. The Naval Hospital will continue to support the Camp Lejeune and New River Commands by chairing Family Advocacy Committees (FAC) in accordance with reference (b) to assess whether reported cases of family violence are "established", "suspected", or "unfounded". Personnel filling the billets listed on enclosure (2) will constitute the Family Advocacy Committee. The Provost Marshal will investigate reports of suspected maltreatment that appear to involve violations of the UCMJ.

(2) Off-Base Incidents. Liaison will be made with local civilian law enforcement agencies, civilian medical facilities, and social service agencies to encourage reporting of off-base child/spouse maltreatment incidents involving Marines and Navy families to the DFAR. The Provost Marshal will establish civilian law enforcement contacts who will investigate off-base cases.

c. Jurisdiction. North Carolina General Statute S7a-523 vests exclusive jurisdiction over all cases involving child abuse and neglect in the District Courts of the State of North Carolina. The child protective service department within the Onslow County Department of Social Services is authorized by a memorandum of understanding to operate aboard Marine Corps Base, Camp Lejeune, and Marine Corps Air Station (H), New River to facilitate the identification, evaluation, and treatment of temporary or foster placement of abused/neglected children.

d. Discipline and Rehabilitation

(1) When service personnel are reported for child/spouse maltreatment, and that maltreatment is subsequently "established" by Naval Hospital personnel, through military or civilian investigation, civilian family protective agencies, or the Family Advocacy Committee, the following procedures apply:

(a) The Naval Hospital's Duty Family Advocacy Representative (DFAR), utilizing the format contained in enclosures (3), reports cases to the offender's parent organization, to the Family Advocacy Program Officer, and the civilian authority in accordance with state law.

(b) The offender's parent organization coordinates with the Family Advocacy Program Officer, the DFAR and civilian authority, when applicable and, if justified by previous performance and individual motivation, places the offender in a rehabilitation program as provided for in paragraphs 7d(6) and 7d(1) below. Enclosure (4) contains a list of Family Advocacy Program staff and telephone numbers.

(c) The offender's family members are offered rehabilitative services and are encouraged to attend.

(d) If the offender fails to cooperate fully in the rehabilitative program, or if abuse/neglect continues disciplinary or administrative action will be taken by the parent command.

(2) Child/spouse maltreatment cases will be evaluated for disciplinary proceedings or administrative discharge.

(3) Reference (c) provides criteria for assignment to and retention in the Marine Corps Personnel Reliability Program. Involvement in child/spouse maltreatment may preclude assignment to the program or may be considered as grounds for temporary or permanent decertification.

(4) If alcohol/drug abuse are considered to be factors contributing to the abusive behavior, screenings will be conducted in accordance with references (d) and (e).

(5) When possible, rehabilitative treatments will be directed at the whole family. The duration of rehabilitative programs will not normally exceed one year, and participation in them will not preclude deployments. Progress of treatment will be assessed at 6-week intervals by the Family Violence Rehabilitation Counselor. The results of these evaluations will be forwarded to the parent organization with a recommendation concerning continued treatment. Enclosure (5) contains a summary of the case management stages. Commanders should coordinate with the Commandant of the Marine Corps (Code MMEA-8 for enlisted or Code MMOA for officers), via Assistant Chief of Staff, Manpower, to avoid issuance of PCS orders to an individual who is successfully participating in a rehabilitative treatment program. Commanding Officers of Navy personnel should coordinate with the Commandant of the Marine Corps (Code MPH-25). Examples of possible courses of action are:

(a) SNM/SNO may be stabilized at current command for \_\_\_\_\_ months (not normally to exceed 12 months) to complete a rehabilitative treatment program. At the end of this period the individual's case may be reviewed to determine availability for worldwide assignment, or possible separation from the service.

(b) SNM/SNO may be transferred only to a major command in CONUS where rehabilitative treatment is readily available.

(6) Rehabilitative Programs will be coordinated by the Family Advocacy Program Officer. A professional Family Violence Rehabilitation Counselor has been added to the Family Service Center Staff to assist in the prevention and education programs and to conduct the rehabilitation programs. Examples of rehabilitative programs are group counseling, parental skills training, couple communications training, intensive stress management classes and individual counseling. Every effort will be made to conduct rehabilitation programs after normal working hours.

(7) The Family Advocacy Program Officer will ensure that family members who are involved in abuse/neglect are offered rehabilitative treatment services, either directly or through referral. Even in cases where the offender is separated for abusive behavior, the family will be referred to civilian agencies to enhance protection and promote recovery of the family.

(8) Personnel dealing with the Marine and Navy personnel who are established child/spouse abusers/neglecters are cautioned concerning the sensitive nature of this offense. Commanding Officers will ensure appropriate confidentiality in all cases.

e. Records. Case management records which are retrievable by a personal identifier, such as the person's name or social security number, must comply strictly with reference (f) as to all aspects of information collections, safeguarding, uses, and disclosures.

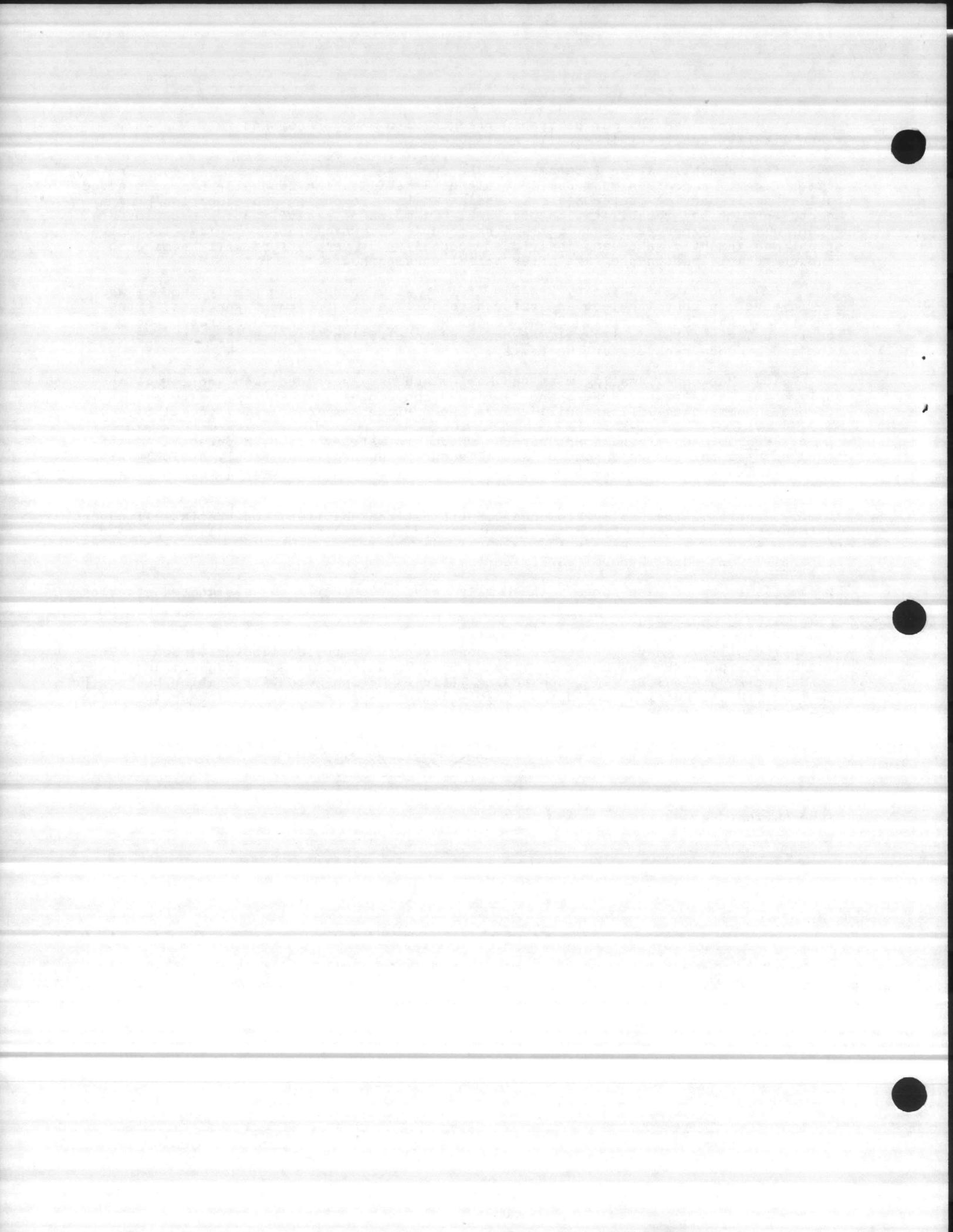
f. Reports. The Family Violence Identification/Rehabilitation statistical report, enclosure (6) and the roster of child/spouse abusers, enclosure (7) will be prepared for each command by the Family Advocacy Program Officer and submitted quarterly to the respective Commanding General(s)/Officer(s).

8. Availability of Base Forms. The Family Service Center is the designated stocking point for the forms contained in enclosures (3), (6) and (7), and will be issued to organizations upon request.

9. Applicability. Having received the concurrences of the Commanding General's 2nd Marine Division, FMF, 2nd Force Service Support Group (Rein), FMF Atlantic, and the 6th Marine Amphibious Brigade, Commanding Officers Marine Corps Air Station Helicopter, New River, Naval Hospital and Naval Dental Clinic, Camp Lejeune, this order is applicable to those commands.

  
T. M. STOKES, JR.  
Chief of Staff

Distribution: A



DEFINITIONS

The following definitions are intended for the administration of the programs in this order. They do not modify or influence definitions applicable to statutory provisions and regulations that relate to determinations of misconduct and line of duty, disability benefits, and criminal responsibility for a person's acts or omissions.

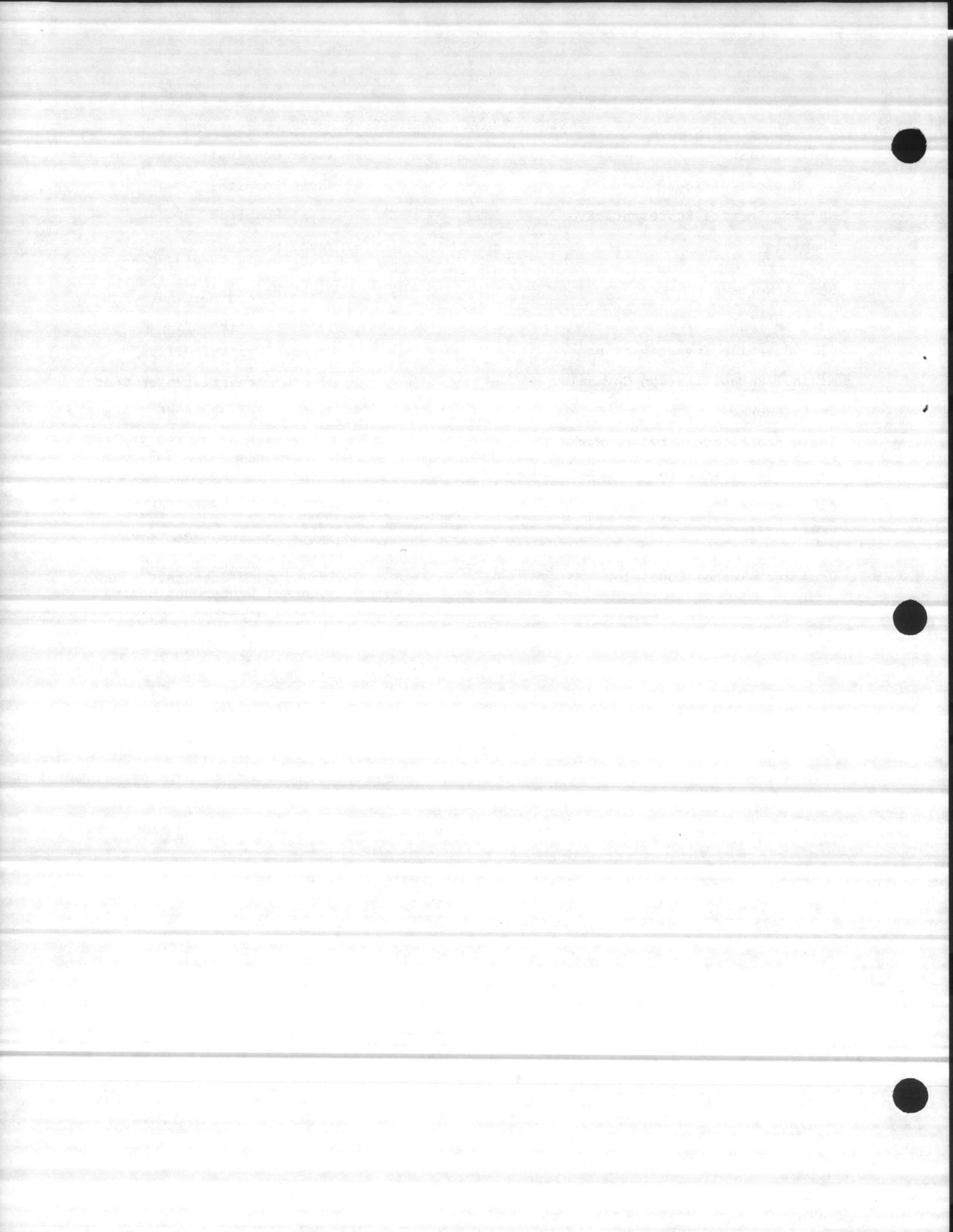
1. Family Advocacy Program. A program designed to address prevention, evaluation, treatment, and reporting of child and spouse maltreatment including:
  - a. Physical abuse.
  - b. Psychological and emotional abuse.
  - c. Sexual abuse.
  - d. Physical neglect of children.
  - e. Psychological and emotional neglect of children.
2. Child. An unmarried person, whether natural child, adopted child, foster child, stepchild, or ward, who is a dependent of the military member or spouse and who either:
  - a. Is 18 or under; or
  - b. Is incapable of self-support because of mental or physical incapacity for which treatment is authorized in a medical facility of the Military Services.
3. Spouse. A partner in a lawful marriage where one of the partners is a military member.
4. Maltreatment. A general diagnostic term referring to abuse or neglect.
5. Abuse. Direct physical injury, trauma, or emotional harm intentionally inflicted on a child or spouse.
6. Neglect. Acts of omission or commission comprising inadequate or improper care that could reasonably result in injury, trauma, or emotional harm.
7. Harm. Includes, but is not limited to:
  - a. Physical, emotional, or mental injury, including physical injury resulting from otherwise lawful corporal punishment of children (that is customarily accepted parental discipline) that becomes unlawful when it disfigures, impairs, or otherwise traumatizes an individual.
  - b. A sexual offense, whether assaultive or nonassaultive, accomplished or attempted (as defined in state statutes).
  - c. Failure to supply a child or dependent with adequate food, clothing, shelter, education (as defined by state statutes), or health care, though financially able to do so or when offered financial or other reasonable means to do so. (Adequate health care includes any medical or nonmedical remedial health care permitted or authorized under state statutes.)
  - d. Abandonment of a child or spouse, as defined by state statute.
  - e. Failure to provide a child with adequate supervision or guardianship.
8. Victim. An individual who is the subject of abuse or neglect.
9. Child Abuse or Neglect. Abuse or neglect in which the abuser or neglecter is responsible for the child's welfare. This includes parents, guardians, or other individuals or agencies charged with the welfare of the child.

Enclosure (1)

10. Spouse Abuse. Abuse in which the abuser is the spouse.
11. Abusers or Neglecters. Persons directly or indirectly responsible for resultant neglect or abuse that occurs to an individual.
12. At Risk. A situation involving a family or family member who is vulnerable to child abuse or neglect or spouse abuse.
13. Family Advocacy Committee (FAC). A multidisciplinary team of designated individuals working on the installation level, tasked with the evaluation and determination of maltreatment cases and the submission and coordination of treatment and disposition recommendations. Enclosure (3) of this order contains a list of billet incumbents who are members of the FAC.
14. Family Advocacy Committee Case Determinations
  - a. Unfounded. After investigation by the FAC a determination has been made that the evidence in a particular case is insufficient to support abuse or neglect.
  - b. Suspected. Maltreatment may have occurred, but insufficient evidence exists to warrant a determination of established maltreatment.
  - c. Established. Essentially, a diagnostic term indicating a Family Advocacy Committee or its working subcommittee has collective judgement that maltreatment has indeed occurred. In addition to the patient's physical condition and information received from family members or collateral contacts, a diagnosis of established maltreatment must be based upon the results of investigations conducted by the Naval Investigative Service; military, State, county or local child welfare or protective agencies; State, county, or local law enforcement agencies; military law enforcement groups; or those conducted in accordance with the JAG Manual.
15. Duty Family Advocacy Representative (DFAR). An individual designated by the Commanding Officer, Naval Hospital to intervene in spouse and child maltreatment cases by conducting the initial intake interviews with victims and/or abusers.
16. Family Advocacy Program Officer. The Director, Family Service Center, has been designated by the Commanding General, Marine Corps Base, Camp Lejeune, North Carolina to perform the additional duty of coordinating and monitoring the Camp Lejeune, Family Advocacy Program.
17. Family Violence Rehabilitation Counselor. A senior civilian social worker who conducts the preventive, educational, and rehabilitation aspects of the program. This individual is on the Family Service Center Staff.

FAMILY ADVOCACY COMMITTEE MEMBERS

Pediatrician	Naval Hospital
Sr. Medical Officer	Naval Hospital
Nursing Service Representative	Naval Hospital
Chaplain	Naval Hospital and Family Service Center
Social Workers	Naval Hospital
Psychiatrist	Naval Hospital
CID: Juvenile Investigations	Provost Marshal Office
Alcohol Rehabilitation Counselor	Alcohol Rehabilitation Center
Social Worker	Camp Lejeune Dependent Schools
Child Protective Services Worker	Department of Social Services
Family Violence Rehabilitation Counselor	Family Service Center
Visiting Nurse	Navy Relief Society
Legal Officer	Office of the Staff Judge Advocate
Drug and Alcohol Counselor	Tri-Command Substance Abuse Control Center and Marine Corps Air Station(H), New River



REPORT OF CHILD/SPOUSE ABUSE  
MCBCL 1754

FROM	TO
FAMILY ADVOCACY REPRESENTATIVE	COMMANDING OFFICER

SECTION I CASE INFORMATION

NAME OF OFFENDER (Last, First, M.I.)	RANK	SSN
UNIT	NAME OF VICTIM (Last, First, M.I.)	
RELATIONSHIP	TYPE OF MALTREATMENT	
DATE OF INCIDENT	CASE ESTABLISHED BY	DATE ESTABLISHED

SECTION II DETAILS OF INCIDENT (who, what, when, where, how, why?)

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SECTION III DISPOSITION RECOMMENDATIONS OF FAMILY ADVOCACY COMMITTEE

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REMARKS

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SIGNATURE	DATE
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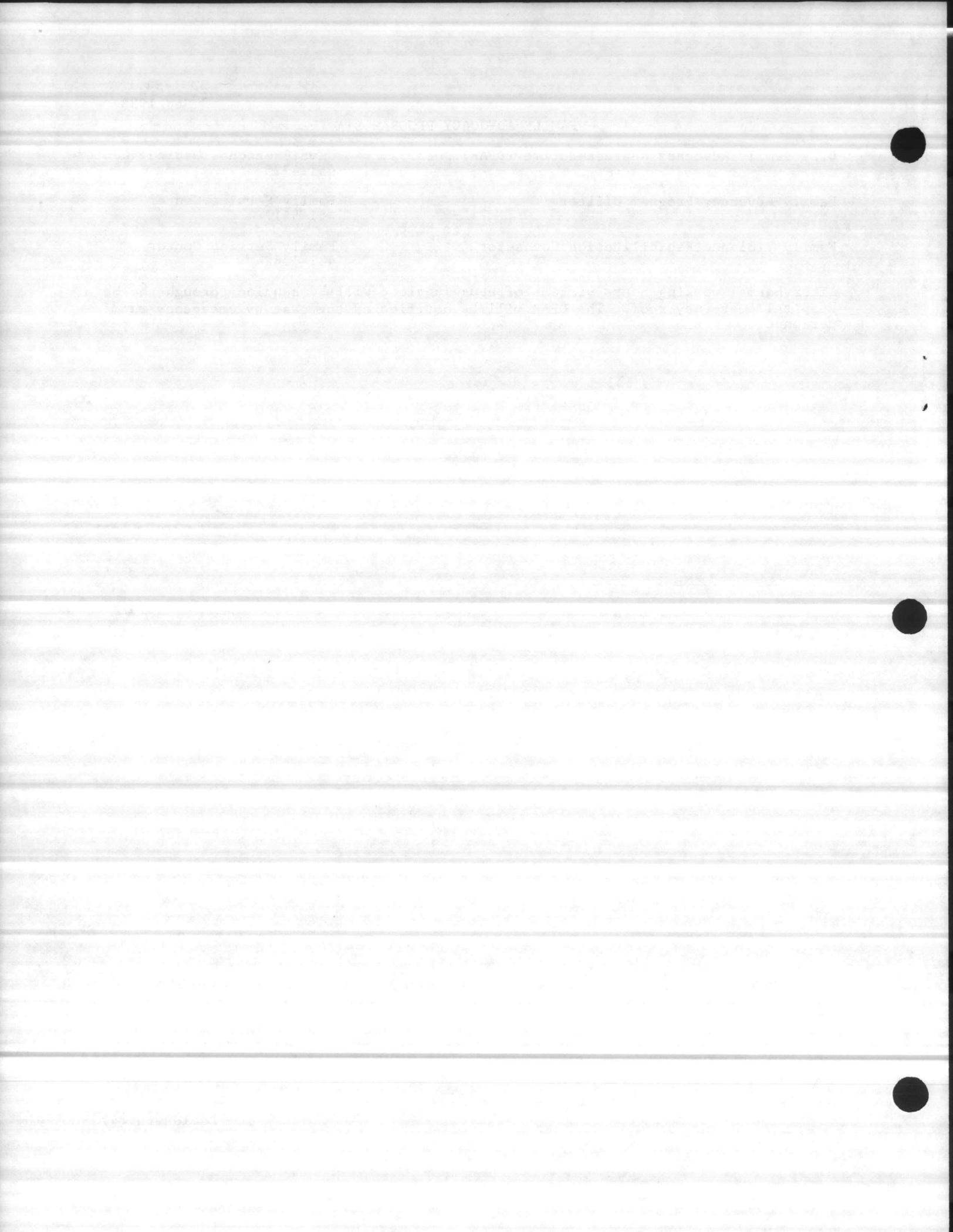
7 Sep 1983

FAMILY ADVOCACY PROGRAM STAFF

Duty Family Advocacy Representative (DFAR)	Naval Regional Medical Center 451-4775
Family Advocacy Program Officer	Family Service Center 451-5417
Family Violence Rehabilitation Counselor	Family Service Center 451-1362

After normal working hours victims of abuse/neglect will be handled through the Naval Hospital emergency room. The DFAR will be notified of the case by emergency room personnel.

Enclosure (4)



CASE MANAGEMENT STAGES

- Stage I            Child/Spouse maltreatment cases reported to the Duty Family Advocacy Representative (DFAR)
- Stage II           Case determination made by Family Advocacy Committee (FAC)
- Stage III          "Established" cases reported to parent organization and Family Advocacy Program Officer
- Stage IV           Parent organization coordinates with DFAR, Family Advocacy Program Officer, and civilian authority when applicable and decides appropriate course of action - i. e., disciplinary action - rehabilitation - administrative discharge
- Stage V            Rehabilitation with 6-week interval evaluations
- Stage VI           Rehabilitation completed or if rehabilitation is not completed, disciplinary and/or administrative action is taken



BO 1754.1  
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FAMILY VIOLENCE IDENTIFICATION/REHABILITATION  
STATISTICAL REPORT  
MCBCL 1754/1

FOR QTR ENDING

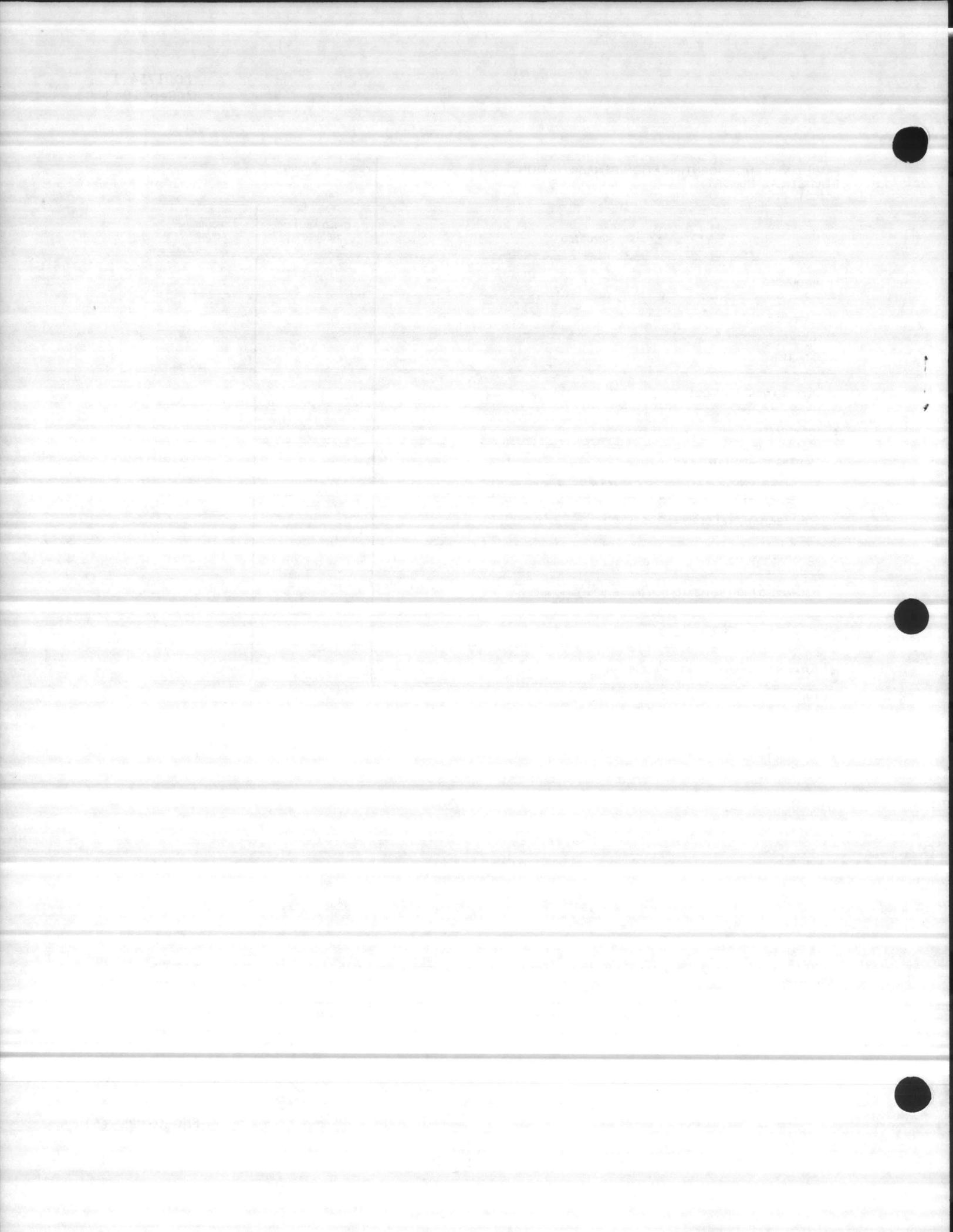
CASES REPORTED	CHILD ABUSE/ NEGLECT	SPOUSE ABUSE
1. UNFOUNDED		
2. SUSPECTED		
3. ESTABLISHED		
4. INVESTIGATION CONTINUED		
5. TOTAL CASES		
ABUSERS REHABILITATED	M	O
M = ACTIVE DUTY MILITARY    O = OTHER (Dependents, Retired)		
1. IN REHABILITATION AT BEGINNING OF PERIOD		
2. JOINED REHABILITATION		
3. DISCHARGED FROM REHABILITATION (Rehabilitation Completed)		
4. REHABILITATION NOT COMPLETED		
5. TOTAL IN REHABILITATION AT END OF PERIOD		

REMARKS

SIGNATURE

DATE

ENCLOSURE (6)





CODE FOR ROSTER OF CHILD AND SPOUSE ABUSERS

<u>COLUMN</u>	<u>CODES</u>
1a: Name	None
1b: Init	None
2: Rank	E1 through E9 WO1 through CWO4 O1 through O6
3: SSN	None
4: Unit	None
5: Maltreatment	First digit(s) indicates type of maltreatment. S-spouse; C-child; SC for both child and spouse maltreatment.  Second digit indicates the number of times the individual has been identified as an abuser/neglecter.
6: DLI	List the 6-digit (date) of latest incident of maltreatment.
7: Rehab	List the 6-digit date rehabilitation began. (List NA if not in rehabilitation program)
8: Rehab Comp	List the 6-digit date rehabilitation was completed. (List NA if there was no participation in a rehabilitation program or if rehabilitation is continuing)
9: UCMJ	List four digits. First digit is the number of office hours at which the individual was found guilty of an abuse offense; second digit is the number of summary courts-martial; third is the number of special courts-martial; fourth is the number of general courts-martial. (List all zeros if none)
10: Disch Proc	List the 6-digit date on which administrative discharge proceedings were begun at the battalion level. (List all zeros if none)
11: Remarks	List all the applicable remarks from the following or append remarks as desired:  a. Children in foster care b. Civil proceedings pending c. Restraining order issued d. Spouse no longer residing in area e. Assigned ARS (date) f. Awarded (type) discharge by court g. Currently UA (deserter) h. Left unit by (disch; EAS; PCS) i. Deployed (approximate date of return)

MCBCL 1754/2