STATEMENT

OF

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BEFORE THE

COMMITTEEE ON OVERSIGHT AND GOVERNMENT REFORM SUBCOMMITTEE ON NATIONAL SECURITY AND FOREIGN AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES

OVERSIGHT HEARING ON
SEXUAL ASSAULT IN THE MILITARY

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EXECUTIVE SUMMARY

The Department of Defense's capacity to deal with sexual assault has been significantly updated in the past three years with the institution of a new policy on sexual assault, which was drafted with input from experts from both the civilian and military communities. In addition, the Sexual Assault Prevention and Response Office (SAPRO) was created to serve as the single point of responsibility on this matter for the Department. SAPRO aggressively tracks the reporting and disposition of sexual assaults and summarizes DoD and Military Service initiatives in an annual report to Congress. S APRO also assists command and supervises the climate at all three Military Service Academies and documents yearly findings in a separate Congressional report.

The Department of Defense Sexual Assault Prevention and Response policy has three cornerstones:

- *Victim Care.* Every military installation in the world -- both in garrison and deployed -- now has a Sexual Assault Response Coordinator (SARC). Each SARC trains and oversees one or more Victim Advocates who help victims understand their reporting options and pathways to medical and mental health care. Victim Advocates serve a variety of functions, but their most important job is immediate support and assistance to victims in crisis. In addition, the Department has instituted Restricted Reporting, which allows a Service Member victim to confidentially access medical care and advocacy services without reporting the crime to standard law enforcement or command channels. In calendar year (CY) 2005, 435 victims made confidential reports. In CY2006, there were 756 Restricted Reports and in CY 2007, there were 705. The Department strongly believes that these 1896 individuals would not have accessed care had it not been for the new Restricted Reporting policy.

- *Prevention through Training and Education.* All Military Services have implemented sexual assault awareness training at strategic points in an active duty member's accession, development, and deployment. Training programs are tailored to the unique mission and culture of each Military Service. In addition, the Department is working with national experts to develop an effective prevention strategy. In July 2007, the Sexual Assault Prevention and Response Office (SAPRO) worked with the National Sexual Violence Resource Center (NSVRC) and a team of experts from the military and civilian communities to produce recommendations on developing an effective prevention strategy. On July 14, SAPRO assembled a panel of social scientists to fine-tune those recommendations into a comprehensive strategy document. We anticipate that our strategy document will be drafted by the end of the fiscal year.

- *System Accountability.* In addition to the SAPRO office, the following entities are either examining the effectiveness of DoD's policy and programs or recently examined it: the Sexual Assault Advisory Council, the Defense Task Force on Sexual Assault in the Military Services, the Government Accountability Office (GAO), and the DoD Inspector General.

Congress has been the Department's partner in forging a unique approach to combating sexual assault. This testimony addresses both GAO and Congressional concerns.

Mr. Chairman, Ranking Member Shays, I am pleased to be here today to update the National Security and Foreign Affairs Subcommittee on the Department of Defense's (DoD's) progress in our crusade against sexual assault. I am Michael Dominguez, the Principal Deputy Under Secretary of Defense for Personnel and Readiness. Our goal today is to ensure the Members have a clear understanding of where we came from, where we are, and where we are going. Make no mistake; the Department will use every available resource in our efforts to eradicate this behavior within our Services. One assault is one too many.

First, let me express my thanks to the Services for their resolute dedication to support the Department's Sexual Assault Prevention and Response policies and programs. Together we have created a program unprecedented by any other organization, both civilian and military.

HISTORY

Care for Victims of Sexual Assault Task Force

Our program began in 2004, when former Secretary of Defense Donald Rumsfeld directed the Under Secretary of Defense for Personnel and Readiness, Dr. David S.C. Chu, to undertake a 90 day review of all sexual assault policies and programs among the Services and DoD, with particular attention to any special issues that may arise from the circumstances of a combat theater. On February 13, 2004, the Undersecretary of Defense for Personnel and Readiness established the Department of Defense Care for Victims of Sexual Assault Task Force, an eight member task force. That Task Force published a report with a series of recommendations and findings. Although each Service has programs in place to care for victims of sexual assault and hold offenders accountable, the Task Force expressed a need to have

consistency of excellence across the Service programs to deal with sexual assault. Thus, one of the major recommendations focused on the Department's need for a single point of accountability regarding sexual assault policy.

Joint Task Force on Sexual Assault Prevention and Response

The Department's leadership concurred and authorized the Joint Task Force on Sexual Assault Prevention and Response (JTF-SAPR). Within three months of being stood up, the JTF-SAPR created a comprehensive sexual assault prevention and response policy centered around three key themes: care and treatment for victims, prevention through training and education, and system accountability. This new policy revolutionized the Department's sexual assault response structure. In June of 2005, the Department further advanced its groundbreaking policy by instituting Restricted Reporting which allows victims to confidentially access medical care and advocacy services. At the heart of the policy is a system that respects the privacy and needs of the victim.

Sexual Assault Prevention and Response Office

In 2005, the JTF-SAPR transitioned into SAPRO, the Sexual Assault Prevention and Response Office, which is responsible for policy and oversight.

CARE AND TREATMENT FOR VICTIMS

Sexual assault is the most underreported violent crime in society. National studies indicate that as many as 8 out of 10 sexual assaults go unreported in the civilian sector– largely because victims are fearful of the life-changing events and loss of privacy that often come with a public

allegation. The potential costs and consequences of sexual assault are extremely high. Sexual assault not only affects the health and stability of our war fighters, it has a negative impact on mission readiness.

Likewise, a 2002 civilian study found that most sexual assaults against females were NOT reported to the police by the victim. According to the study 18% of rapes are reported by the victim, 24% of attempted rapes are reported by the victim, and 16% of sexual assaults are reported by the victim.[1]

In a 2006 Defense Manpower Data Center survey on sexual assault, most military survey respondents indicated that if they experienced unwanted sexual contact they did not report it to authorities. Of the 6.8% of women and 1.8% of men in the survey who reported an unwanted sexual contact, only 21% of women and 22% of men ever reported the crime to an authority. However, 86% of women and 17% of men in the survey who reported did so within 3 days. Research indicates that victims of sexual assault who get into care quickly are likely to have better outcomes. Research also shows that rape victims who don't report their victimization to an authority rarely seek treatment. One of the chief barriers to reporting – or in other words – one of the primary things that keeps sexual assault victims from coming forward in both the civilian and military communities – is the fear of how that victim will be perceived by others. Consequently, we introduced a reporting system that allows victims to make a choice about how

[1] Rennison, Callie. Rape and Sexual Assault: Reporting to the Police and Medical Attention, 1992 - 2000, BJS (2002)

they report the crime of sexual assault. Our policy encourages victims to make an Unrestricted Report – that is a report to military law enforcement and command -- that allows the Department to investigate and hold perpetrators accountable. However, should victims feel unready to participate in the military justice system, they may choose to make a Restricted Report. This option enables victims to receive medical care, mental healthcare, and other support services without initiating a criminal investigation or alerting their command structure. This flexible reporting system is designed to respect the needs of victims and encourage them to get care quickly. Victims who initially make a Restricted Report may change their minds and participate in an official investigation at any time.

Our policy also created a unique framework for an expanded and thorough response system. We have a twenty-four hour, seven day a week support network at all military installations and for deployed units worldwide. Sexual Assault Response Coordinators (SARCs) and Victim Advocates are available to provide consultation and support so that our military members understand their options and get the care and support they need. We believe the response structure we have institutionalized will continue to instill trust and confidence in Service Members who are victims of sexual assault and spur them to come forward for assistance. As more victims gain confidence in the system, it is our hope that more victims will switch to Unrestricted Reporting, which will ultimately increase offender accountability.

The Department's leadership is working hard through its oversight capabilities to refine and improve policy. It is our vision that the professionals in military's programs will not only help victims, but also help commanders establish a climate within their units that is sensitive to

the needs of victims. Ultimately, we stand a better chance of treating and retaining our highly trained people if we get them into care as soon as possible.

Increased Access to Care

Encouraging victims of sexual assault to gain access to care as soon as possible may minimize short and long term health effects. While the details of medical and mental health assessment and treatment are beyond the scope of the new DoD Policy implemented in 2005, the Sexual Assault Prevention and Response Office and the Military Services work cooperatively with both the DoD medical community and the Department of Veterans Affairs to facilitate continued access to care when it is desired by the Service Member.

While one incident of sexual assault may last only a few minutes, its effects can last throughout the lifetime. Fortunately, most people are quite resilient. Some may need little assistance beyond an initial sexual assault forensic examination and treatment for injury and disease prevention. Others however, may need much more care. Sexual assault can change how one views the world, how one views others, and how one views him or herself. Mental health problems, both in the short and long term, are real and prevalent consequences of sexual assault. An attack can bring about mental illnesses, such as posttraumatic stress disorder, depression, and substance abuse problems. These silent, often invisible consequences of sexual assault not only impact an individual's functioning, they also impact the military unit to which she or he is assigned. Getting our people the care they need so they can resume their duties and family life, is of utmost importance to the Department.

The Department has highly qualified medical and mental health providers both at home and in deployed installations. DoD policy encourages the Services to fully prepare their healthcare providers with scientifically-validated assessment and intervention techniques for problems stemming from sexual assault. In some locations, the Department trains Sexual Assault Nurse Examiners and physicians to assess and treat victims. In other locations, the Department contracts with local nurses and physicians to provide these vital services. Mental health providers in psychology and social work graduate training programs in the Department receive experience with treating victims of sexual assault. They are also often taught the latest interventions by leaders in the field of mental health care for sexual assault.

Sexual assault is not just a military problem: it is a societal problem. Many recruits come to us with a history of sexual assault. According to research, this means two things. First, they are more likely to experience another sexual assault at some time in their life than someone not previously sexually assaulted is. Second, these people stand to experience higher rates of mental health problems when exposed to combat. I should note for the record that we do not screen for a history of sexual assault upon entry into military service. Rather, this information comes to us from anonymous studies of active duty forces.

Nevertheless, combat exposure doubles the risk for posttraumatic stress disorder for those people who were victims of a prior sexual assault. Despite that recent finding published this year, we have been screening for physical and emotional problems associated with exposure to hostilities for several years. Screening is conducted on all Service Members before, during and after operational deployment, including all active duty, National Guard, and reservists. Members

who screen positively for traumatic exposure are referred to their primary care provider for a more in-depth assessment of their needs. Our medical providers fall within the Restricted Reporting channel. Consequently, should a victim of sexual assault disclose the incident during a medical encounter or screening appointment, the victim's ability to make a Restricted Report remains intact.

The Department is currently working hard to expand the medical and mental health treatment opportunities for victims of sexual assault. The Defense Center of Excellence for Psychological Health and Traumatic Brain Injury has been working closely with SAPRO to ensure that sexual assault treatment programs are in the portfolio of care being researched and expanded under their purview. The Department has always had mental health treatment available for victims of sexual assault. However, our capacity to provide such treatment is currently being expanded, as the Department recruits and employs more mental health care providers.

In addition, the Department has been working with the Department of Veterans Affairs (VA) on a variety of initiatives. VA has been providing treatment to victims of sexual assault and sexual harassment for the past several years. Consequently, anyone who served on active duty may receive care at a VA health care facility for military sexual trauma. In addition, SAPRO has arranged for VA to accept our Restricted Reporting documentation as evidence that a Restricted Report was made for compensation claims. SAPRO and VA's Military

Sexual Trauma (VMST) program often collaborate on a variety of projects to educate both military and civilian personnel about the reporting and treatment options available for victims. VA also participates in our Sexual Assault Advisory Council.

As mentioned previously, not all of our victims are ready to come forward – even with our confidential reporting option. While we continue to build a climate of confidence and demonstrate our commitment to care, we also provide information about the SAPR program via a variety of channels. Military OneSource offers a communication channel that helps us educate and inform our military community about the crime of sexual assault, reporting options, and care benefits. SAPRO recently met with OneSource and updated the training to their telephone operators to better assist and assess victims of sexual assault, should one call for assistance. In addition, SAPRO recently re-wrote the on-line materials available for victims of sexual assault. OneSource is available to all military Service Members, including Guard and Reserve Members who are no longer activated.

We have over two hundred Sexual Assault Response Coordinators and Victim Advocates deployed in Iraq and Afghanistan at any given time. We owe a great tribute to our SAPR personnel there, as they have made this program work for our victims. The battlefield is a complicated environment and we face many challenges getting services to victims when hostilities are underway. USCENTCOM and the military services have filled in most of the gaps. However, from a policy standpoint, we know that we can provide more guidance for deployed personnel. We are currently examining how our policy is working in joint environments, including deployed locations, with a focus on response and training.

PREVENTION THROUGH TRAINING AND EDUCATION

Again, we have created a framework for an integrated sexual assault response capability worldwide, with the intent of providing everyone, everywhere equal access to the same support systems and response personnel. However, taking care of victims is just one front on our war against sexual assault. Clearly, preventing the crime is of equal – if not greater – importance. In 2005, the Department initiated an aggressive and wide-reaching education agenda. Mandatory sexual assault prevention and response training is required of every Service Member at multiple stages throughout their careers.

For the past three years, the Department has focused on making military Service Members aware of the program, their reporting options, and the kinds of assistance that is available for victims. The Department's program provides baseline training for all military personnel. As soon as an individual enters the military, regardless of rank, we educate him or her about sexual assault, our policies and programs, and prevention.

Pre-deployment training provides Service Members advance information on our OCONUS programs. As part of the deployment checklist, Service Members must undergo sexual assault prevention training before departure. Training includes refresher training on our policies, detailed information on the program in their deployed location, and explains some of the cultural differences of host countries.

The Department's policy has detailed guidance for commanders. Each service has implemented additional training to augment a commander's ability to address this crime and hold

military units together. Due to the traumatic nature of sexual assault and the complexity of the issue, the Services typically opt to provide commanders with SAPR training before assuming command. Training is focused on assisting the needs of a sexual assault victim, addressing the rights of the accused, and maintaining good order and discipline within their units.

We also have rigorous training geared toward sexual assault responders, including Sexual Assault Response Coordinators, Victim Advocates, healthcare personnel, investigators and Judge Advocates. The training topics are specific to each responder's role, and ensure that each responder is competent to fulfill their responsibilities with effective victim response or offender accountability.

Awareness training only takes us so far. Most all of our military people know that sexual assault is a crime, that it is incompatible with military service, and that it is a gross violation of their obligation to protect their fellow warriors from harm. Nevertheless, sexual assault continues to happen, both in the military and the civilian community as well. Therefore, just knowing something is wrong is not a deterrent. A full-blown prevention effort is actually much more complicated than "Just say no." Rather, prevention is comprised of a number of initiatives. Please recognize, however, the Department is on a path for which there is no map. A prevention program of the size and scope needed for the military is unprecedented. No civilian institution, state government, or city has ever undertaken a mandate to prevent sexual assault in a population as large, diverse and geographically distributed as ours. As we develop our prevention strategy, we are literally at the leading edge of what social science and public health can tell us about what works.

By educating Military Members when and how to act, we may be able to turn bystanders into actors who can prevent sexual assault. Our program works on a variety of levels, from small to large:

- On the individual's knowledge and skill;
- On the behavior of military community organizations that provide services; and
- On large organizations and government policy

These levels, together, create a spectrum of sorts --a spectrum of opportunity for individual and organizational change. These levels are known as the Spectrum of Prevention, and this is the framework that guides our efforts in this area. When change occurs simultaneously on each level of this spectrum – to the individual, to the community, to the government – the effects begin to interact and become stronger through the synergy of the efforts working together.

Our prevention efforts come from renowned experts who have dedicated their lives to sexual assault prevention research. In July 2007, the Department convened a Prevention Summit with over 100 leading military and civilian advocacy experts. At the Summit, we discussed policy initiatives and ways to prevent this crime. On July 14, SAPRO assembled a team of social scientists, experts, and representatives from the Military Services to refine our DoD prevention strategy. Our plans involve a complete survey of the scientific literature pertaining to prevention of sexual assault, a comprehensive strategy document, and a powerful social marketing strategy. The DoD Prevention Strategy will not only educate our people on the crime of sexual assault, it will also show them in concrete examples how they can intervene safely on someone's behalf.

The Department conducted a worldwide SARC Conference in June of 2006, training more than 350 professionals from installations worldwide. Last week, we conducted our second worldwide Sexual Assault Response Coordinator conference which focused on supporting victims through the military justice process. We know from experience that the best way to hold an offender accountable for sexual assault is to have a victim willing to participate in the legal and investigative processes. Victims are more likely to stay with the process if supported every step of the way. Speakers included leadership and subject matter experts in sexual assault policy, victim care, PTSD, toxicology, military justice, investigations, and victim's rights.

To date, the Services have provided sexual assault prevention and awareness training to over one million active duty and reserve Service Members. Moreover, the Services have expanded their training programs to adapt training curricula to their unique needs.

Our aggressive training and outreach program, coupled with the new option of Restricted Reporting, sends an important message: The Department cares about its members. We believe our Service Members are hearing us. After three full years of policy implementation, we are seeing more victims making reports and accessing care. While we are extremely concerned when even one sexual assault occurs, we see the increase in victim reports as a very positive indicator of growing confidence in the program. We believe the increase in reports is a validation of the need for the ability to privately access medical care and advocacy services. We believe that these military members would never have sought services had they not had the ability to select how and when to engage our support system.

SYSTEM ACCOUNTABILITY AND OVERSIGHT

We have several mechanisms in place to oversee and evaluate whether our policy is being implemented effectively.

Sexual Assault Advisory Council (SAAC)

Dr. Chu, the Under Secretary of Defense for Personnel and Readiness, chairs the Sexual Assault Advisory Council (SAAC), which includes representatives from the Department of Defense as well as various federal agencies, including the Department of Veterans Affairs (VA) and the Department of Justice (DOJ). In recent meetings, Dr. Chu tasked our Sexual Assault Prevention and Response Office and the Services to examine areas in which our policy needed to be modified to more effectively address this crime. Consequently, we are currently working to resolve challenges that have been identified. For example, we are working to find solutions to overcome the challenges we face in implementing Restricted Reporting in states such as California that have mandatory reporting laws for sexual assault.

Policy Assistance Teams (PATs)

In order to determine best practices and update our policy accordingly, we continue to develop ways to assess implementation of our policy. This year, the Department plans to expand its assessments and conduct visits to military installations to further evaluate the progress of the Services' programs. As a method to assess best practices, we created Policy Assistance Teams (PATs). PATs will consist of SAPRO staff and Service personnel who will evaluate policy implementation; assist commanders with execution; provide commanders with immediate feedback; and revise and improve current policy. In addition to Policy Assistance Teams,

SAPRO and the Services are reviewing high-profile cases and case level data to determine program implications.

Defense Task Force on Sexual Assault in the Military Services (DTF-SAMS)

The Defense Task Force on Sexual Assault in the Military Services (DTF-SAMS) was initially the Defense Task Force on Sexual Harassment and Violence at the Military Academies (DTF-SHVMA). It was created by the NDAA for FY04 and issued its report in June 2005. That task force was extended by the National Defense Authorization Act for FY05. After DTF-SHVMA completed its mission, its name was changed to DTF-SAMS and the mission was changed to an examination of sexual assault in the Armed Forces. It will assess and make recommendations on key areas in sexual assault prevention and response. DTF-SAMS has been constituted and held its first organizational meeting in May. The first official meeting is scheduled for 11-15 August. During the course of its work, DTF-SAMS will visit a number of installations. We welcome the work of the Task Force and the recommendations it will bring forward at the conclusion of its work. It is important for us to know whether the policies and programs we have put in place are working; if they can be improved; and if there are things that we missed. We will carefully evaluate every recommendation of the Task Force and make necessary changes in a timely manner.

Data Reporting

An important part of accountability and oversight is the collection and analysis of data to track progress and identify problem areas early on. The Department continues to aggressively track the number and disposition of sexual assaults occurring annually within the Department.

Each year on March 15, the Department and Services forward their data as well as a comprehensive review of our efforts in an annual report to Congress. This past year, we conducted an assessment of the climate at all three Military Service Academies. That report was delivered to Congress last December. We are proud of the quick and thorough changes that the Academies have instituted to make their institutions safer.

While the Department has always complied with the sexual assault reporting requirements set forth in Section 577 of the Ronald Reagan National Defense Authorization Act for FY05, our program efforts clearly demand a more detailed view of sexual assault as it occurs across the DoD. Consequently, we are currently working to develop a data collection system that will allow for greater study and analysis of sexual assault.

Department of Defense Office of the Inspector General

The Department of Defense Office of the Inspector General currently has two open investigations regarding sexual assault. The first is an evaluation of DoD sexual assault response in the areas of operation of Operation Enduring Freedom and Operation Iraqi Freedom. The second is an audit of DoD and DoD contractor efforts to prevent sexual assault and harassment against contractor employees within those same areas of operation. We have appointed a point of contact for each investigation from our Sexual Assault Prevention and Response Office and are coordinating with the DoD IG on these investigations. In tandem, we are examining these areas to determine whether policy modifications need to be made.

COORDINATION

Coordination with the Services

Sexual assault prevention and response efforts are coordinated throughout the Department and conducted in partnership with the military service. One primary example of coordination is demonstrated in the four SAAC subcommittees, each of which has a co-chair from the SAPRO office and a co-chair from a Service.

SAAC Subcommittees

The policy and accountability, research, training, and outreach subcommittees function as working groups to identify and address issues with regular progress reports to the SAAC. The subcommittees include SAAC members, or their agency designated representatives.

The Policy and Accountability Subcommittee examines the effectiveness of current sexual assault prevention and response policy and examines accountability. It is developing policy standards and has addressed issues pertaining to contractors and civilians, foreign nationals, challenges due to civilian rape reporting laws, changes to the Uniform Code of Military Justice (UCMJ), and differences between domestic violence and sexual assault policies.

The Research Subcommittee oversees data collection, develops and monitors the SAPRO research agenda, and provides guidance for research studies and data analysis.

The Training Subcommittee reviews sexual assault training and prevention methods and ensures policy requirements are met. It also looks for gaps in training, identifies areas for training policy improvements and explores new and innovative training methods.

The Outreach Subcommittee evaluates the effectiveness of current and recent outreach methods and develops outreach plans to reach internal and external stakeholders more effectively.

Coordination with Military Criminal and Legal Offices

Department policy designates the Sexual Assault Prevention and Response Office as the single point of responsibility for sexual assault policy matters, except for legal processes under the Uniform Code of Military Justice and criminal investigative policy matters. Jurisdiction of legal processes is assigned to the Judge Advocates General of the Military Departments. Criminal investigative policy matters are assigned to the DoD Inspector General (DoD IG). On January 15, 2008, the policy subcommittee of the Sexual Assault Advisory Council hosted a meeting including representatives from the legal and investigative community to ensure that no gaps exist. As a result, the committee recommended collaborative work with the OSD Office on Legal Policy to ensure that the victim witness liaison is engaged early enough in Unrestricted Reports to provide sufficient support to victims. We have followed through on that recommendation and will monitor whether the gap has been addressed as part of the Policy Assistance Team visits.

COORDINATION WITH OTHER FEDERAL AGENCIES

Relationship with the Department of Veterans Affairs

We work closely with VA to address sexual assault in the military. VA is represented on the SAAC and the DoD/VA Joint Executive Council. Recently, SAPRO and VA coordinated to allow a Victim Reporting Preference Statement to serve as evidence of sexual assault reporting for claims purposes. Victims must acknowledge their choice of an Unrestricted or Restricted Report in writing in the Victim's Preference Statement, which lists the exceptions that apply to Restricted Reporting and how that reporting option may limit the ability to prosecute the offender. During this process, the Sexual Assault Response Coordinator or Victim Advocate advises the victim of the reporting options available to him or her, explains the benefits and limitations of each choice, and documents the reporting option the victim selects.

We participate with VA as members of the Interagency Working Group on Violence against Women. Recently, we worked with VA to address challenges that are faced by victims who make Restricted Reports and then later apply for disability. SAPRO and representatives of the VMST team often train together and have taught at military and VA conferences. For example, a member of the SAPRO staff trained at the VA conference on military sexual trauma and a member of VMST team will teach at DoD's upcoming worldwide SARC conference.

Relationship with Other Federal Agencies

In addition to VA, the SAAC has representatives from the following federal agencies: the Department of State, the Department of Justice, the Centers for Disease Control, and the Department of Health and Human Services. A representative from our Sexual Assault

Prevention and Response Office is a member of the federal Interagency Working Group on Violence Against Women and participates in monthly federal networking calls which include representatives from numerous federal agencies.

CONCLUSION

Care for Victims. Prevention through Training and Education. System Accountability. These are the three cornerstones of our sexual assault prevention and response program. Given the dedication of the professionals that work in this program across the Department, I have no doubt that we are well on the way to meeting our goal of reducing the number of sexual assaults and eventually eliminating this crime from the military.

Although I have only skimmed the surface of a comprehensive but young and evolving program, I hope I have answered many of your questions. We have accomplished remarkable progress in a short time frame but we know our work to eradicate sexual assault is not complete. In the future, we will no doubt meet additional challenges but we will continue to work with Congress, the GAO and other oversight bodies continue to refine the Department's sexual assault program, and ultimately create a benchmark for the nation. Thank you for your time. I would be happy to answer any additional questions you might have.