

7 SEPTEMBER 1993



Medical Command

FAMILY ADVOCACY PROGRAM

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1. The Air Force Family Advocacy Program (FAP) promotes family health, welfare, and morale by preventing or treating cases of maltreatment and by supporting family members who have special medical or educational needs. These services keep maltreatment and exceptional medical or educational needs from reducing the duty performance of Air Force people. This directive establishes policy for managing the FAP throughout the Air Force.
2. The Air Force will offer maltreatment prevention services to active duty members and their families, whether or not those families are identified as *at-risk*.
3. All families with special medical or educational needs will be identified to the Exceptional Family Member Program (EFMP) for coordination on case management and permanent change of station assignment.
4. Through the Family Advocacy Office, the Air Force will provide or coordinate evaluation or therapy for eligible beneficiaries in all reported cases of family maltreatment.
5. This directive establishes the following responsibilities and authorities:
 - 5.1. HQ USAF/SG oversees policy for and advocates the Air Force's FAP. HQ USAF/SG also interfaces with the Office of the Secretary of Defense's staff to develop Department of Defense (DoD) policy and legislative initiatives.
 - 5.2. The Air Force Medical Operations Agency (AFMOA) acts as the agent for HQ USAF/SG in carrying out the Air Force's approved and directed policies of FAP prevention, recordkeeping, reporting, clinical intervention, and program evaluation.
 - 5.3. AFMOA's Family Advocacy Division helps the Air Force Surgeon General form plans and policies for the FAP.
 - 5.4. Major command (MAJCOM) surgeons support the FAP and make sure bases within their MAJCOM comply with it.

5.5. Installation commanders carry out the FAP and establish the Family Advocacy Committee at all installations.

5.6. Commanders of medical treatment facilities (MTF) manage and monitor base-level health care associated with the FAP.

5.7. The Family Maltreatment Case Management Team (FMCMT) manages all FAP cases.

6. Terms Explained:

6.1. **At-Risk Populations** are individuals or families that exhibit characteristics known to be associated with family maltreatment.

6.2. **Family Maltreatment** exists when a military family member experiences nonaccidental physical or emotional trauma or neglect.

6.3. **Family Maltreatment Case Management Team** is a multidisciplinary team that assesses cases and plans intervention for all maltreatment cases.

6.4. **Maltreatment Prevention Services** are programs for all eligible beneficiaries aimed at preventing family maltreatment, as well as educating people to recognize and report suspected maltreatment.

6.5. **Special Medical or Educational Needs** are those requiring special medical care or educational services.

6.6. **The Exceptional Family Member Program** is the Air Force program that identifies family members with special needs, ensures families discover the proper source of care, and coordinates with HQ Air Force Military Personnel Center the appropriate geographic reassignment of sponsors.

7. This policy applies to all military and civilian beneficiaries who are entitled to receive care in an MTF.

8. See **Attachment 1** for measures used to comply with this policy.

9. See **Attachment 2** for publications that relate to this policy.

ALEXANDER M. SLOAN, Lt General, USAF, MC
Surgeon General

Attachment 1

MEASURING AND DISPLAYING COMPLIANCE WITH POLICY

A1.1. The Air Force FAP will report three performance indicators: percentage of bases offering prevention services, incidence of EFMP families in the Air Force, and the rate of family maltreatment. HQ AFMOA/SGPS collects and maintains data on these indicators. Measurement charts will display quarterly or semiannual trends. The maltreatment data are available through RCS: DD-FM&P(W)1738, *The Child and Spouse Abuse Incident Report*.

A1.1.1. Percent of US Air Force MTFs Offering Prevention Services (Figure A1.1.). HQ AFMOA/SGPS will divide the number of installation MTFs offering prevention services by the total number of MTFs to determine the percentage in compliance and display this data quarterly.

A1.1.2. Incidence of EFMP Families in the US Air Force (Figure A1.2.). HQ AFMOA/SGPS will monitor the number of EFMP families known to US Air Force MTFs by collecting and displaying data semiannually. The desired trend is a *flat line* rather than increasing or decreasing. This *flat* trend is appropriate because HQ AFMOA/SGPS wants the number of EFMP families to remain proportional to total Air Force strength. HQ AFMOA/SGPS expects to support a reasonable number of seriously ill family members with this service.

A1.1.3. Rate of Family Maltreatment (Figure A1.3.). HQ AFMOA/SGPS will monitor the rate of family maltreatment reports per 1,000 active duty personnel by collecting and displaying this data quarterly.

Figure A1.1. Sample Metric of MTFs Offering Prevention Services

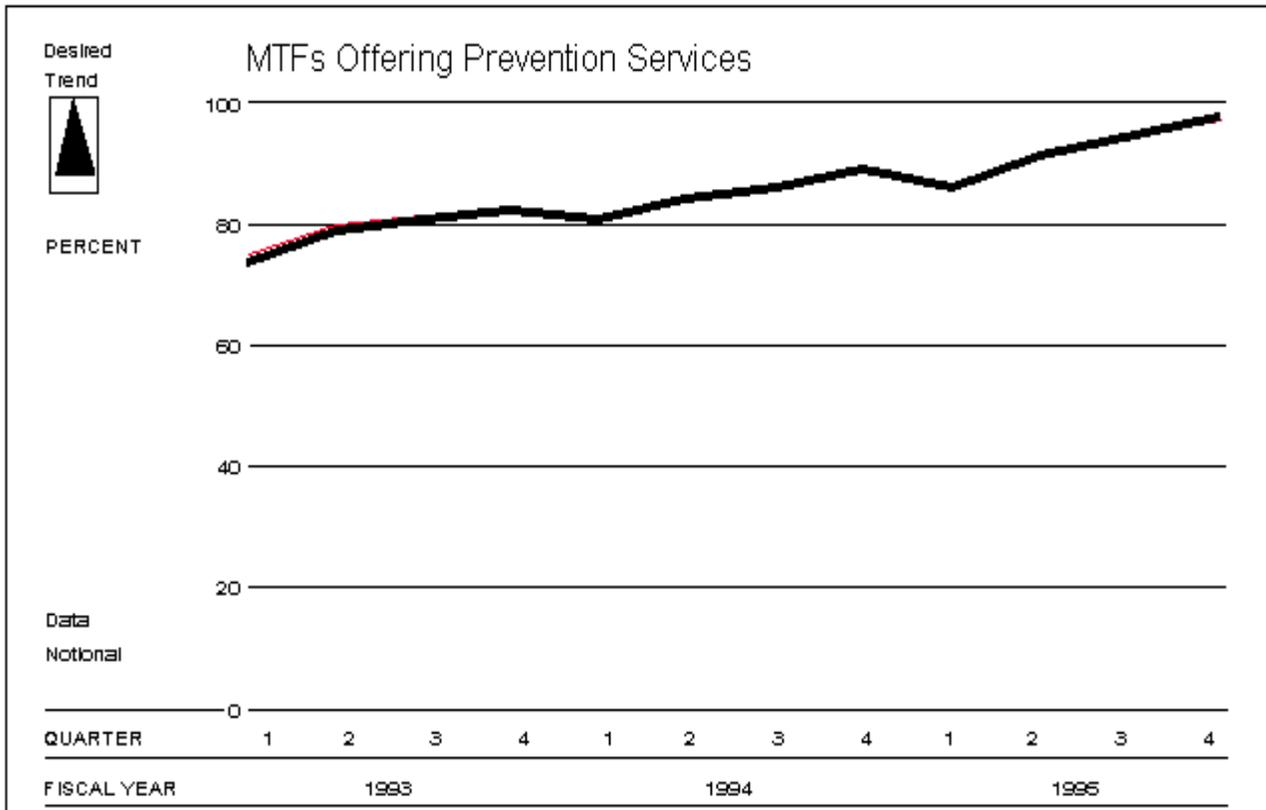


Figure A1.2. Sample Metric of Incidence of EFMP Families in the USAF.

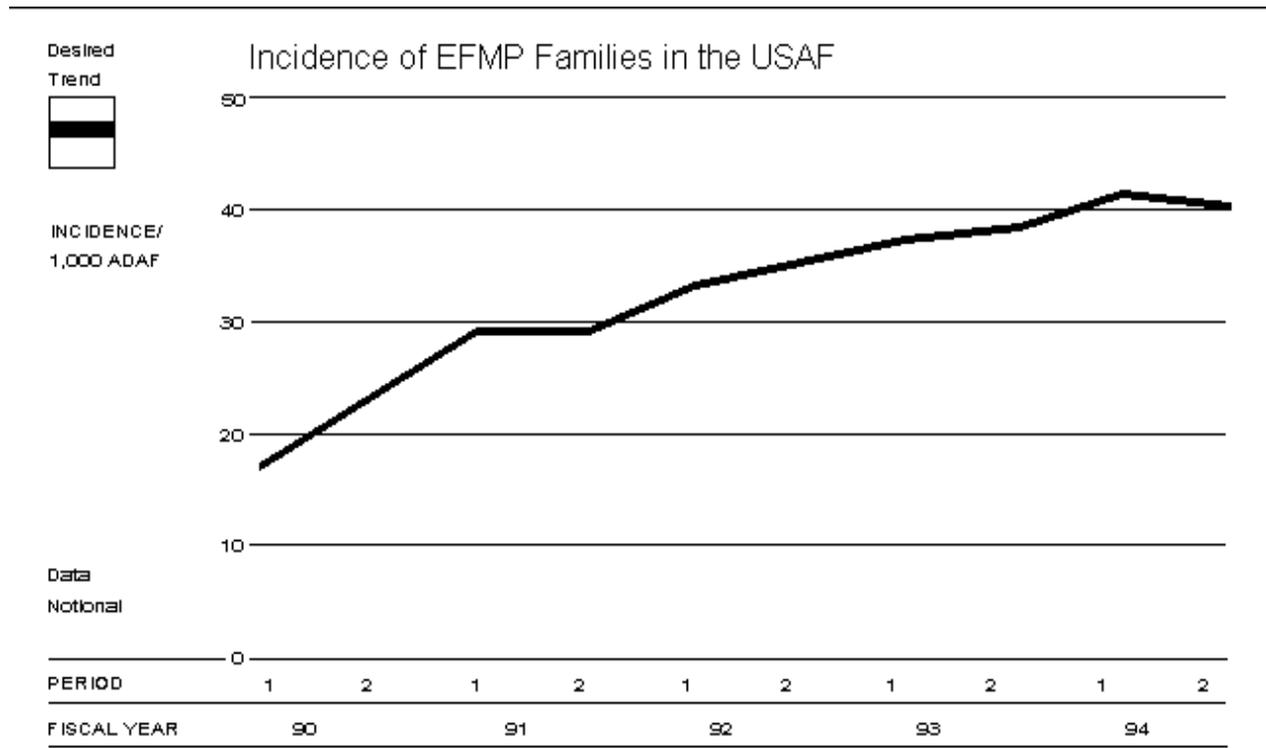
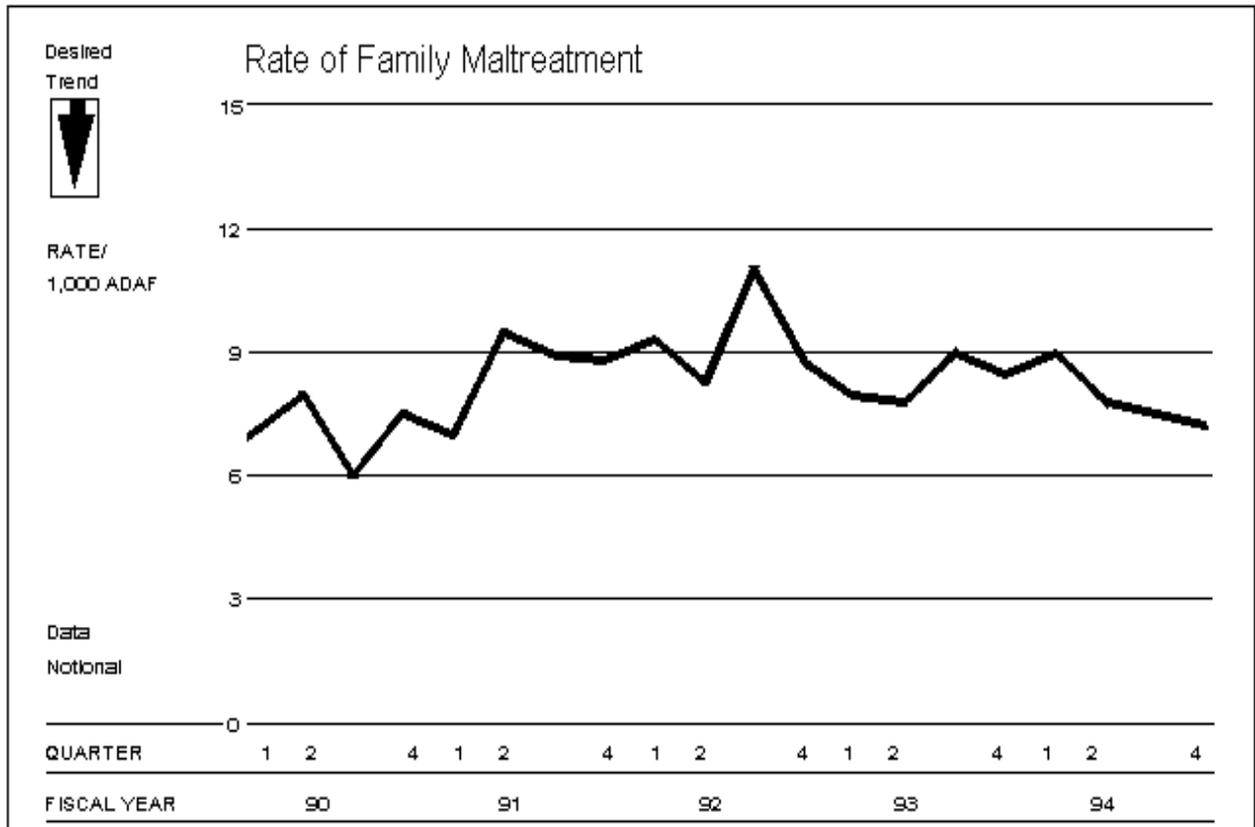


Figure A1.3. Sample Metric of Rate of Family Maltreatment.



Attachment 2

RELATED PUBLICATIONS

Implemented Publications:

DoD 1010.13-R, *Overseas Assignment of Sponsors Who Have Children With Disabilities Who Are Space-Required Students in The Department of Defense Dependent Schools (DoDDS)*, March 1992

DoD Directive 6400.1, *Family Advocacy Program*, June 23, 1992

DoD Instruction 6400.2, *Child and Spouse Abuse Report*, July 10, 1987

DoD Instruction 6400.3, *Family Advocacy Command Assistance Team*, February 3, 1989

Child Abuse Prevention and Treatment Act of 1974 (as amended)

The Crime Control Act of 1990

The Individuals With Disabilities Education Act of 1991

The DoD Family Advocacy Program Standards and Self-Assessment Tool August 1992

Related instructions and guidance:

AFI 24-101, *Family Member Travel*, formerly AFR 75-8

AFPD 24-1, *Personnel Movement*

AFI 36-2101, *Preparation of Personnel Selected for Relocation--Base Level Procedures*, formerly AFR 35-17

AFI 40-301, *Family Advocacy Program Procedures*, formerly AFR 160-38

AFI 41-115, *Persons Authorized Health Care, Health Benefits, Charges, and Billing Procedures*, formerly AFR 168-6