

#### Report to Congressional Committees

February 2024

## K-12 EDUCATION

DOD Has Taken
Steps to Support
Students Affected by
Problematic Sexual
Behaviors, but
Challenges Remain



Highlights of GAO-24-106182, a report to congressional committees

#### Why GAO Did This Study

DODEA is required to protect students from discrimination based on sex, which can include sexual harassment.

Senate Report 117-130 and House Report 117-397 include a provision for GAO to examine DODEA's response to unwanted sexual behaviors. This report examines (1) the information DODEA collects to identify unwanted sexual behavior and (2) the availability of support services to students that are harmed by or exhibit such behavior.

GAO analyzed the most recent available DODEA data on reported incidents of unwanted sexual behavior among students in school years 2019–2020 through 2022–2023. GAO also conducted site visits to 11 DODEA schools and the FAP agencies serving five military communities in the U.S. and Europe, selected for geographic, grade level, and service branch variation. GAO also reviewed relevant federal laws and agency policies and interviewed agency officials from DODEA, Child and Youth Advocacy, and FAP.

#### What GAO Recommends

GAO is making five recommendations to DOD, including to (1) assess reporting processes for normative behaviors, (2) monitor DODEA inclusion in response efforts, (3) monitor efforts to increase FAP clinical expertise, (4) assess efforts to improve participation in FAP support services, and (5) assess its policy to exclude civilian-dependent students from receiving most FAP services. DOD generally agreed with GAO's recommendations.

View GAO-24-106182. For more information, contact Jacqueline M. Nowicki at (617) 788-0580 or nowickij@gao.gov.

#### February 2024

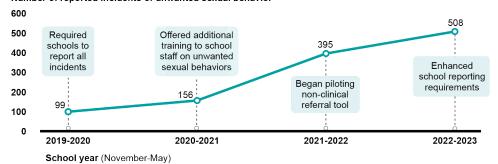
#### K-12 EDUCATION

#### DOD Has Taken Steps to Support Students Affected by Problematic Sexual Behaviors, but Challenges Remain

#### What GAO Found

The Department of Defense Education Activity (DODEA), which educates over 66,000 military-connected pre-K through grade 12 students worldwide, collects detailed information about reported incidents of unwanted sexual behavior among students. These behaviors include those that are normative (but inappropriate), like unwanted touching in younger grades. It also includes behaviors that are severe and problematic at any age, like sexual assault. Since 2019, unwanted sexual behavior reports at DODEA schools have increased substantially due to enhanced reporting requirements. However, DODEA has not sought feedback on its updated reporting requirements from school leaders, who raised concerns about significant administrative burden with formally reporting normative behaviors, and stigma for students involved in them.

#### DODEA School Incident Reports and Key Efforts to Enhance Reporting Number of reported incidents of unwanted sexual behavior



Source: GAO analysis of DODEA incident reporting data and agency documentation. | GAO-24-106182

Note: DODEA school closures during the pandemic may also have contributed to fewer reports of unwanted sexual behaviors during school years 2019–2020 and 2020–2021.

DODEA students who are harmed by or exhibit problematic sexual behaviors face challenges accessing appropriate support services. DOD policy directs the Military Community Advocacy Directorate's Family Advocacy Program (FAP) to implement a consistent response strategy. However, GAO identified various weaknesses hindering these efforts. Specifically, the Military Community Advocacy Directorate:

- has not monitored how consistently FAP includes DODEA in multidisciplinary teams, which are installation-wide response efforts, despite known issues;
- has not monitored its efforts to close the gap in the number of FAP clinicians with expertise needed to treat children with problematic behaviors;
- has not assessed the effectiveness of its efforts to address low participation in FAP clinical support services among eligible military families; and
- chose to exclude the nearly one in five DODEA students who are children of civilian defense workers from accessing most FAP services and has not assessed whether this policy meets the needs of military communities.

Without addressing these weaknesses, DOD risks ongoing challenges in ensuring that students who are harmed by or exhibit problematic sexual behavior receive the support needed to assure the safety of the DODEA community.

**United States Government Accountability Office** 

## Contents

Letter		1
	Background	4
	DODEA's Enhanced Requirements Have Led to Increased	
	Reporting, but School Leaders Raised Concerns about Reporting Developmentally Appropriate Behaviors	9
	DOD Has Not Fully Addressed Factors that Prevent DODEA	3
	Students from Accessing Needed Support Services	17
	Conclusions  Decreased define for Frenchise Action	25
	Recommendations for Executive Action Agency Comments	26 27
Appendix I	Comments from the Department of Defense	28
Appendix II	GAO Contact and Staff Acknowledgments	31
Tables		
	Table 1: DODEA Policies and Procedures for Addressing	
	Unwanted Sexual Behavior	7
	Table 2: DOD Non-clinical Referral Tool for Classifying Unwanted Sexual Behaviors among Children and Youth in	
	Department of Defense Education Activity (DODEA)	
	Schools and on Military Installations	11
	Table 3: Family Advocacy Program Support and Follow Up Services Available for Civilian-Dependent and Military-	
	Dependent Students	23
Figures		
	Figure 1: DODEA School Districts and Student Enrollment Data,	
	School Year 2022–2023	4
	Figure 2: Department of Defense (DOD) Military Community  Advocacy Directorate and Roles Regarding Problematic	
	Sexual Behavior among Children and Youth on Military	
	Installations	8
	Figure 3: DODEA Reports of Unwanted Sexual Behavior and Key	
	Efforts to Enhance Reporting, 2019–2020 through 2022–2023 School Years	10

Figure 4: Grade-levels of Students Involved in Alleged Unwanted	
Sexual Behaviors Reported in Department of Defense	
Education Activity (DODEA) Schools, November 7,	
2022–May 31, 2023	13
Figure 5: Department of Defense Education Activity (DODEA)	
School-Assessed Severity of Reported Incidents of	
Alleged Contact and Noncontact Sexual Acts among	
Students, March through May 2023	15

#### **Abbreviations**

CYA Child and Youth Advocacy
DHA Defense Health Agency
DOD Department of Defense

DODEA Department of Defense Education Activity

FAP Family Advocacy Program NCRT Non-clinical referral tool

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February 13, 2024

The Honorable Jack Reed Chairman The Honorable Roger Wicker Ranking Member Committee on Armed Services United States Senate

The Honorable Mike Rogers
Chairman
The Honorable Adam Smith
Ranking Member
Committee on Armed Services
House of Representatives

The Department of Defense (DOD) has implemented a series of efforts aimed at addressing the prevalence of sexual harassment and other forms of sex discrimination in the military and providing resources for affected servicemembers, civilians, and their families. These include establishing department-wide policies, procedures, and complaint resolution processes and providing assistance such as crisis intervention, emotional support, and resource referrals. For example, DOD's toll-free Safe Helpline (877-995-5247) is a confidential crisis support service—similar to the 988 Suicide & Crisis Lifeline number—specially designed for members of the military community affected by unwanted sexual behaviors. The Helpline is available 24/7.

DOD's commitment to an environment free from sexual harassment and sex discrimination extends to the Department of Defense Education Activity (DODEA), which is responsible for educating over 66,000 K–12 students, mostly overseas. However, DOD's Inspector General has raised concerns about DODEA's response to allegations of unwanted sexual behavior.¹ Specifically, in 2020, the Inspector General found that DODEA administrators did not report all allegations to the proper authorities.

<sup>&</sup>lt;sup>1</sup>Department of Defense, Inspector General, *Evaluation of the Department of Defense and Department of Defense Education Activity Responses to Incidents of Serious Juvenile-on-Juvenile Misconduct on Military Installations*, DODIG-2020-127 (Washington, D.C.: Sept. 4, 2020).

Additionally, the Inspector General found that victims did not have access to sufficient support services, such as mental health counseling.

In general, allegations of unwanted sexual behaviors are widely acknowledged to be underreported or, in some cases, reported but ignored for years.<sup>2</sup> Exposure to such harassment and victimization is traumatic and can have serious lifelong consequences for students' overall well-being if left unaddressed.<sup>3</sup> These consequences may include depression, anxiety, involvement in interpersonal violence or sexual violence, substance abuse, poor social functioning, and poor school performance (including lower grade point averages and standardized test scores and poor attendance).

Senate Report 117-130 and House Report 117-397 accompanying the James M. Inhofe National Defense Authorization Act (NDAA) for Fiscal Year 2023 include a provision for GAO to examine issues related to sex discrimination in DODEA schools. This report examines: (1) the extent to which DODEA collects information needed to identify unwanted sexual behavior that poses risks to students and (2) the extent to which support services are available to DODEA students that exhibit or are harmed by problematic sexual behaviors.

To assess the extent to which DODEA collects information needed to identify unwanted sexual behavior that poses risks to students, we analyzed data on reported incidents of unwanted sexual behavior recorded in DODEA's electronic incident reporting systems.<sup>4</sup> We focused our review on the roughly 6-month reporting period (Nov. 7, 2022 through

<sup>&</sup>lt;sup>2</sup>See, for example, U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, Criminal Victimization, NCJ 255113 (2020).

<sup>&</sup>lt;sup>3</sup>K. Wang, et al., Indicators of School Crime and Safety: 2019, NCES 2020-063/NCJ 254485 (Washington, D.C.: National Center for Education Statistics, U.S. Department of Education, and Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice, 2020). GAO, *Children Affected by Trauma: Selected States Report Various Approaches and Challenges to Supporting Children*, GAO-19-388 (Washington, D.C.: Apr. 24, 2019).

<sup>&</sup>lt;sup>4</sup>We reviewed data reported through DODEA's Director Critical Information Requirement reports, which are filed by DODEA's Regional Chief of Staff, or their designee, to flag certain severe incidents, such as rape or other criminal conduct, that need to be brought to the immediate attention of DODEA's Director. We also reviewed data reported through DODEA's Serious Incident Reports, which are filed by school principals or assistant principals and include a range of sexual behaviors among students. Neither data system includes information on disciplinary actions. The information DODEA provided did not include personally identifiable information.

May 31, 2023) following DODEA's introduction of two new reporting fields related to such behaviors. Given the short period for which these more detailed data were available, we also reviewed incident data from the three most recent completed school years (2019–2020, 2020–2021, and 2021–2022). Additionally, we reviewed narrative responses from a nongeneralizable random 5-percent sample of the 869 records over this period. To assess the reliability of these data, we interviewed agency and school officials; reviewed documentation; and reviewed the data for obvious errors, outliers, or missing information. We determined that the data were sufficiently reliable to report on the prevalence and nature of school-reported incidents of unwanted sexual behavior among students over this period.

To further understand how DODEA schools report unwanted sexual behaviors and the types of behaviors reported, we interviewed DODEA officials in headquarters and conducted site visits to 11 schools located within five military communities in the U.S. and Europe. We selected these communities for geographic, grade level, and service branch diversity. We obtained school administrator perspectives on recent changes DODEA made to its reporting requirements to obtain more complete information regarding the nature and severity of incidents of unwanted sexual behavior among students.

Finally, to assess the extent to which support services are available to DODEA students who exhibit problematic sexual behaviors or are harmed by them, we interviewed DOD officials and DODEA school staff such as school counselors, school psychologists, and behavioral health staff. We also interviewed staff from DOD's Child and Youth Advocacy and Family Advocacy Program (FAP) in headquarters and FAP staff in each of the military communities we visited. During these interviews, we discussed services available to students that exhibited or were harmed by problematic sexual behavior, service eligibility requirements, caseloads, challenges staff face in serving these students, steps taken to address them, and barriers to doing so. In addition, we reviewed relevant federal laws, regulations, and agency policies and procedures.

We conducted this performance audit from August 2022 to February 2024 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain

<sup>&</sup>lt;sup>5</sup>We visited DOD schools in the Fort Liberty and Camp Lejeune military communities in the U.S., and the Kaiserslautern/Ramstein, Stuttgart, and Vicenza military communities in Europe.

sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

#### Background

#### **DODEA Schools**

DODEA educated over 66,000 children of military-connected families in the 2022-2023 school year. About 70 percent of these students (over 46,000) attend DODEA schools overseas (see fig. 1). The large majority of students are children of active-duty servicemembers. However, nearly one in five—almost all of them overseas—are dependents of civilian workers, such as DOD civilian employees or contractors. DODEA reports to the Under Secretary of Defense for Personnel and Readiness.

**Pacific** Total students: 21,428 Military dependents: 79% Civilian dependents: 21% **Americas** Total students: 19,989 **Europe** Military dependents: 94% Total students: 24,850 Civilian dependents: 6% Military dependents: 71% Civilian dependents: 29%

Figure 1: DODEA School Districts and Student Enrollment Data, School Year 2022-2023

Source: GAO analysis of Department of Defense Education Activity (DODEA) enrollment data; Map Resources (base map). | GAO-24-106182

## DODEA's Responsibilities to Protect Students from Sex Discrimination

#### Unwanted Sexual Behaviors in K-12 Public Schools

In recent years, K–12 public schools have experienced a rise in unwanted sexual behavior, including rape as well as sexbased bullying, hate speech, and hate crimes, according to nationally generalizable school and student survey data we analyzed in our prior work. For example:

- Approximately 1,064 rapes or attempted rapes occurred in 726 schools in school year 2017–2018, similar to 2015–2016. Similarly, at least one sexual assault occurred in an estimated 4,427 schools in school year 2017-2018, also up from 2015–2016.
- Approximately 1.3 million students reported experiencing bullying related to their identity in school year 2018–2019, increasing from 2015–2016. Of these students:
  - about one in four said the bullying was related to their gender, and
  - about one in five said it was related to their sexual orientation.
- Over 1,000 schools reported experiencing at least one hate crime based on gender, gender identity, and sexual orientation in school year 2017—2018. Between school years 2015—2016 and 2017—2018, there was a significant increase—about 200 more--of hate crimes based on sexual orientation.

Source: GAO-22-104341, K-12 Education: Students' Experiences with Bullying, Hate Speech, Hate Crimes and Victimization in Schools, GAO-22-104341 (Washington D.C.: November 24, 2021). | GAO-24-106182 As with civilian public schools, DODEA is required to protect students from discrimination based on sex.<sup>6</sup> DODEA administrative procedures define sex discrimination as the unequal treatment and/or sexual harassment of someone based on sex, gender, or gender identity, including less favorable treatment based on pregnancy, or being

<sup>&</sup>lt;sup>6</sup>Executive Order 13,160 prohibits discrimination on several bases, including sex, in all federally conducted education and training programs and activities, including DOD schools. Moreover, the John S. McCain National Defense Authorization Act for Fiscal Year 2019 requires DODEA to establish policies and procedures to protect students at its schools who are victims of sexual harassment. Such policies and procedures must provide protections at least comparable to the protections afforded under Title IX of the Education Amendments of 1972, which prohibits discrimination based on sex in education programs or activities that receive federal financial assistance. See Pub. L. No. 115-232, § 562, 132 Stat. 1636, 1776 (2018); 20 U.S.C. § 1681.

subjected to harassment of a sexual nature and/or sexual assault.7

Sex discrimination in schools can take a variety of forms. For example, it can occur when school administrators fail to address sex-based discriminatory conduct between students that is so severe that it limits or denies a student's equal access to DODEA educational benefits. Specific behaviors may include the use of derogatory slurs, epithets, jokes, drawings, and other verbal, visual, or physical conduct that targets a student based on sex.<sup>8</sup> Unwanted sexual behavior may include intentional unwanted touching, including rape and assault (contact sexual acts). It may also include nonphysical acts such as sexting and bullying based on a child's sex, sexual orientation, or gender identity (noncontact sexual acts). All students, regardless of their sex, sexual orientation, or gender identity, can perpetrate or be victims of these behaviors. As indicated in the sidebar, we reported in 2021 that the incidence of unwanted sexual behavior in K–12 schools has generally risen in recent years.

#### DODEA's Policies for Addressing Unwanted Sexual Behavior

DODEA has established and implemented policies and procedures to respond to unwanted sexual behavior by students. These policies and procedures cover school requirements for reporting incidents, evidence gathering and investigation, corrective actions, and the appeals process (see table 1). They also require schools to provide training, professional development, and outreach activities to help ensure that staff and students understand how to report unwanted sexual behavior they experience, witness, or hear about.<sup>9</sup>

<sup>&</sup>lt;sup>7</sup>DODEA Administrative Instruction 1443.01, *Civil Rights Program and Compliance* (Nov. 16, 2022) and 1443.02, *Protecting Against Sexual Harassment Based on Conduct of a Sexual Nature* (May 2, 2023).

<sup>&</sup>lt;sup>8</sup>DOD policy defines discriminatory conduct as conduct that is "unwelcome" and "offensive" based on one or more protected classes (such as sex). We use the term unwanted sexual behavior to refer to a range of sexual conduct exhibited by children or youth under the age of 18 that is unwelcome and involves other children or youth under the age of 18.

<sup>&</sup>lt;sup>9</sup>Students may report such incidents to a teacher, guidance counselor, or other DODEA employee. Students may also report anonymously (e.g., using a school drop-box). DODEA staff must report all incidents of unwanted sexual behavior they experience, witness, or hear about to their supervisor, generally the school principal or assistant principal. DODEA policy also requires DODEA staff to report suspected child abuse or neglect.

Table 1: DODEA Polic	ties and Procedures for Addressing Unwanted Sexual Behavior
Reporting and	School administrators must:
Interim Protection Measures	<ul> <li>complete an electronic incident report for all allegations of unwanted sexual behavior they receive from students, staff, or parents;</li> </ul>
	<ul> <li>take action to ensure immediate student safety, such as separating students or increasing supervision, as warranted (and may also refer students to the school nurse or school counselor);</li> </ul>
	<ul> <li>notify parents of students involved;</li> </ul>
	<ul> <li>refer severe (problematic) incidents to DOD's Family Advocacy Program based on results of DOD's non-clinical referral tool; and</li> </ul>
	<ul> <li>refer all allegations of rape and sexual assault to law enforcement.</li> </ul>
Evidence Gathering and Investigation	<ul> <li>For incidents alleged to have occurred on campus or during school sponsored activities, administrators must investigate by gathering relevant facts and evidence, which may include taking witness statements.</li> </ul>
	<ul> <li>As a result of the investigation, administrators must determine whether the incident occurred as alleged, partially occurred as alleged, or did not occur as alleged.</li> </ul>
	<ul> <li>Incidents alleged to have occurred off campus do not fall within DODEA's jurisdiction to investigate.</li> </ul>
Corrective Actions	<ul> <li>Following their investigation, school administrators may also hold meetings with parents, refer students for counseling, make classroom adjustments to separate students, and offer academic accommodations such as additional time to complete assignments.</li> </ul>
	Administrators may also impose disciplinary measures such as detention, suspension, or expulsion.
Appeals	<ul> <li>If parents, students, or others believe that a DODEA school failed to address a reported incident promptly and adequately, they may file an appeal with DODEA officials in headquarters. These officials will independently review each appeal and take corrective actions, if warranted.</li> </ul>

Source: GAO review of Department of Defense Education Activity (DODEA) Administrative Instructions 1443.01 & 1443.02. | GAO-24-106182

## DOD Responsibility for Responding to Unwanted Sexual Behaviors

The Military Community Advocacy Directorate—under the Under Secretary of Defense for Personnel and Readiness—oversees DOD's Family Advocacy Program (FAP) and Child and Youth Advocacy (CYA), which are charged with leading the agency's response to problematic sexual behavior among children and youth on military installations, including at DODEA schools. 10 The John S. McCain National Defense Authorization Act for Fiscal Year 2019 requires that FAP develop a policy to ensure that it provides a consistent, standardized response to juvenile-on-juvenile problematic sexual behavior allegations across DOD. 11 FAP is charged with providing support services to children and youth exhibiting or harmed by problematic sexual behavior and helping address its effects.

To help FAP carry out these responsibilities, CYA develops and distributes policies on problematic sexual behavior to the four service

<sup>&</sup>lt;sup>10</sup>Pub. L. No. 115-232, § 1089, 132 Stat. 1636, 1996-97 (2018). DODEA and other entities report problematic sexual behaviors—the most severe types of unwanted sexual behaviors—to FAP.

<sup>&</sup>lt;sup>11</sup> Pub. L. No. 115-232, § 1089, 132 Stat. 1636, 1996-97 (2018).

FAPs covering DOD's five military services (see fig. 2). 12 CYA also offers training to service FAP staff and clinicians. In turn, the service FAPs interpret and communicate these policies for their staff at military installations around the world. Installation FAP staff carry out these policies and offer direct services to children, youth, and families.

Figure 2: Department of Defense (DOD) Military Community Advocacy Directorate and Roles Regarding Problematic Sexual Behavior among Children and Youth on Military Installations

The Military Community Advocacy Directorate's Child and Youth Advocacy develops and distributes policy and guidance to service-level FAPs to respond to problematic sexual behaviors, and offers training to staff and clinicians.

Navy Marine Corps Army Air Force and Space Force

Service FAP issues Service level implementing guidance and is responsible for requiring that all installation personnel receive the appropriate training to implement FAP standards.

**Installation FAP** coordinate a multidisciplinary team and offer direct services to students involved in problematic sexual behaviors, including FAP clinical support services to some students.

Source: GAO analysis of the Department of Defense Family Advocacy Program (FAP) process. | GAO-24-106182

Note: The Military Community Advocacy Directorate oversees FAP and Child and Youth Advocacy. Installation FAPs are managed by the commanding Service (e.g., Army, Navy, Marine Corps, or Air Force and Space Force). Multidisciplinary teams conduct installation-wide response efforts to address problematic sexual behaviors among children and youth.

When an incident of problematic sexual behavior among children and youth on a military installation occurs at a DODEA school or is reported to school officials by a DODEA student, DODEA is required to make a report to FAP.<sup>13</sup> FAP staff review the report and confirm the categorization of the behavior and may consult with DODEA to clarify or gather more information on the incident. FAP staff then assemble and convene a multidisciplinary team, which coordinates installation-wide response efforts to the behavior. The multidisciplinary team must include representatives from FAP, military law enforcement, and DODEA (when

<sup>&</sup>lt;sup>12</sup>FAP has a presence on military installations worldwide. According to officials, FAP has about 2,300 staff members, including about 900 clinicians.

<sup>&</sup>lt;sup>13</sup>School officials must also refer reported rape or sexual assault to law enforcement for investigation.

the incident involved a DODEA student or was reported by DODEA). <sup>14</sup> The multidisciplinary team's response efforts may include developing safety and supervision plans to assure safety of the youth involved and sharing resources for families of children and youth who are harmed by or exhibit problematic sexual behaviors. The team also offers support services to eligible families (generally, only active-duty servicemembers and their families). <sup>15</sup> If a family accepts FAP support services, FAP clinicians conduct assessments to better understand the child's needs. In response, a child might receive FAP clinical support (e.g., counseling and cognitive behavioral therapy) and other military-connected services (e.g., prevention and education services or support from behavioral health intervention specialists). FAP also assesses the child's progress and updates safety and supervision plans, if needed.

DODEA's Enhanced
Requirements Have
Led to Increased
Reporting, but School
Leaders Raised
Concerns about
Reporting
Developmentally
Appropriate
Behaviors

Recent Changes to Reporting Requirements Resulted in Increased Reports of Unwanted Sexual Behaviors among Students

Since 2019, unwanted sexual behavior reports at DODEA schools have increased substantially due to enhanced reporting requirements (see fig. 3). Specifically, DODEA school officials reported over 500 incidents of unwanted sexual behavior from the six-month period from November 2022 through May 2023. Over the comparable period in the 2019–2020 school year, just under 100 incidents were reported. This increase in

<sup>&</sup>lt;sup>14</sup>DODEA, Child and Youth Programs, law enforcement, parents, or other individuals or agencies can make reports to FAP.

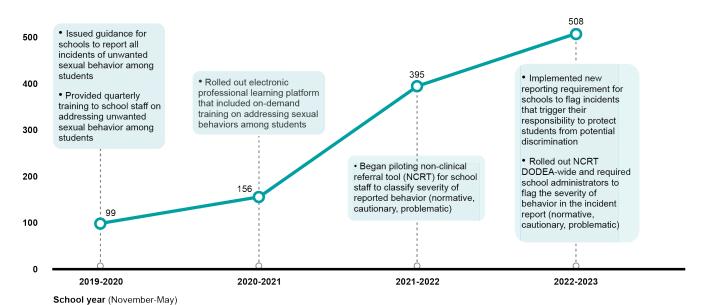
 $<sup>^{15}\</sup>mbox{DOD}$  Instruction 6400.01. FAP generally refers civilian dependents to off-installation support services.

reporting aligns with enhanced DODEA expectations around reporting over this time period.<sup>16</sup>

Figure 3: DODEA Reports of Unwanted Sexual Behavior and Key Efforts to Enhance Reporting, 2019–2020 through 2022–2023 School Years

Number of reported incidents

600



Source: GAO analysis of DODEA incident reporting data and agency documentation. | GAO-24-106182

Note: During school year 2022–2023, the Department of Defense Education Activity (DODEA) implemented a new reporting requirement for school administrators to flag incidents that were "unwanted" and "offensive" and that triggered the agency's responsibility to take action to protect students from discrimination. We compared these data—available from November 7, 2022 to May 31, 2023—to similar periods in prior school years to assess trends in reporting. DODEA school closures during the pandemic may have also contributed to fewer reports of unwanted sexual behaviors during school years 2019–2020 and 2020–2021.

DODEA's reporting enhancements included new guidance to schools on reporting procedures and new requirements for school officials to participate in trainings on these procedures. DODEA also rolled out reporting system enhancements, including new data fields regarding the nature and severity of incidents and system edit checks to identify and resolve data errors. In particular:

<sup>&</sup>lt;sup>16</sup>DODEA school closures during the pandemic may have also contributed to fewer reports of unwanted sexual behaviors during school years 2019–2020 and 2020–2021.

- Beginning in November 2022, DODEA officials said that they required school administrators to report which incidents trigger the agency's responsibility to protect students from potential discrimination. These officials said that they instituted this requirement because conduct that is "unwanted" and "offensive" to the affected student undermines DODEA's ability to maintain a discrimination-free learning environment.<sup>17</sup>
- Since February 27, 2023, DODEA officials said that reports must indicate whether the alleged sexual behaviors were normative (developmentally appropriate), cautionary, or problematic, based on DOD's non-clinical referral tool (NCRT) (see table 2).<sup>18</sup>

Table 2: DOD Non-clinical Referral Tool for Classifying Unwanted Sexual Behaviors among Children and Youth in Department of Defense Education Activity (DODEA) Schools and on Military Installations

	Normative	Cautionary	Problematic
	Developmentally appropriate sexual behavior that is infrequent, not coercive or harmful, and decreases after correction	Behavior that is less common, disruptive to others, and moderately responsive to correction or redirection	Uncommon sexual behavior involving sexual body parts that is developmentally inappropriate or potentially harmful and warrants corrective intervention or supportive services to resolve
Example behaviors (Ages 5–9)	Expressing curiosity about sex and sexuality	Touching self or others inappropriately	Using physical force on others to engage in sexual acts

<sup>&</sup>lt;sup>17</sup>According to DODEA officials, the agency's responsibility to protect students from potential discrimination is trigged by conduct that is "sex-based" (including based on sex, gender, gender identity, or pregnancy) and/or "clearly sexual in nature" that is "unwelcome" and "offensive" to the reported victim, when committed within DODEA's jurisdiction (e.g., on campus). DODEA policy states that when evaluating appropriate corrective measures in response to substantiated conduct, DODEA officials should consider several factors. These factors include the nature and severity of the incident, the objective offensiveness of the conduct under the Reasonable Person Standard based on the age, maturity, and physical and intellectual capacity of the individuals involved, the nature of any past relationship between the individuals involved, and the lingering adverse effects of the incident on those involved.

<sup>&</sup>lt;sup>18</sup>DOD developed the NCRT in conjunction with researchers at The Pennsylvania State University to facilitate reporting of problematic sexual behavior among children and youth in military communities. Alleged incidents assessed to be problematic using the tool must be referred to FAP for further response.

	Normative	Cautionary	Problematic
Example behaviors (Ages 10-12)	Telling inappropriate jokes	Sharing nude images	Bullying or coercing others to send sexual content (e.g., exclude the child or threaten to share a secret if child does not participate)
Example behaviors (Ages 13-18)	Sexual teasing and flirting	Uses themes or obscenities involving sexual aggression	Taking sexual images of others to exploit them

Source: Department of Defense (DOD) Problematic Sexual Behavior in Children and Youth non-clinical referral tool (NCRT). | GAO-24-106182

#### What Do Noncontact and Contact Sexual Acts Look Like in DODEA Schools?

Examples provided to GAO during GAO's 2022–2023 site visits to 11 DODEA schools:

- · Elementary school (three schools visited)
  - a student peering under a bathroom stall at another student
  - a student saying that they "liked their women curvy" and making a corresponding gesture
  - a student repeatedly touching other students inappropriately
- Middle school (four schools visited)
  - a group of students creating a "burn book" including gossip and sexual
  - a student making a derogatory comment about another student's sexuality
  - a student touching themselves inappropriately during class
- High school (four schools visited)
  - a group of students creating a social media page where they ranked the physical attractiveness of their peers
  - students exchanging inappropriate sexual images and text messages during school
  - a sexual assault in an isolated part of the school building

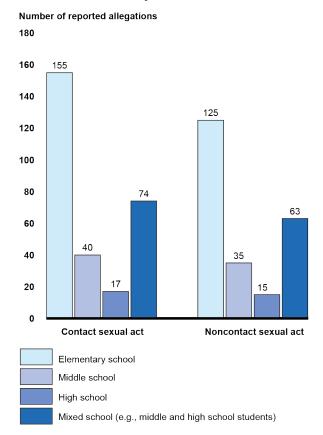
Source: GAO Interviews with DODEA school officials. | GAO-24-106182

Note: Alleged incidents assessed to be problematic using the NCRT must be referred to the Family Advocacy Program for further response. DOD developed the NCRT in conjunction with researchers at The Pennsylvania State University to facilitate reporting of problematic sexual behavior among children and youth in military communities.

Based on our analysis of incident reporting data from November through May of the 2022-2023 school year, we found that:

- just over one-half (56 percent) of the approximately 500 reported incidents involved unwanted physical touch (a contact sexual act); 44 percent did not (see sidebar); and
- about one-half (55 percent) of the approximately 500 incidents reported during their period involved only elementary school students (roughly proportional to DODEA's overall student body), with lower proportions involving students from a mix of grade levels (e.g., middleand high school), middle school only, or high school only (see fig. 4).

Figure 4: Grade-levels of Students Involved in Alleged Unwanted Sexual Behaviors Reported in Department of Defense Education Activity (DODEA) Schools, November 7, 2022–May 31, 2023



Source: GAO analysis of DODEA incident reporting data. | GAO-24-106182

Note: A single reported incident may include multiple allegations. Contact sexual acts include intentional unwanted touching, as well as rape and assault. Noncontact sexual acts include nonphysical acts such as sexting and bullying based on a child's sex, sexual orientation, or gender identity.

Inappropriate touching was the most frequently cited allegation in our review of a nongeneralizable random sample of 69 incident reports (5 percent) from school years 2019-2020 through 2021–2022. 19 Inappropriate touching appeared in 29 of 69 reports. These incidents included consensual sex acts between students and nonconsensual acts,

<sup>&</sup>lt;sup>19</sup>We reviewed narrative information provided for a sample of incidents schools reported from school years 2019-2020 through 2021-2022 to better understand the nature of reported incidents of unwanted sexual behavior over time. Incident reports may include multiple allegations.

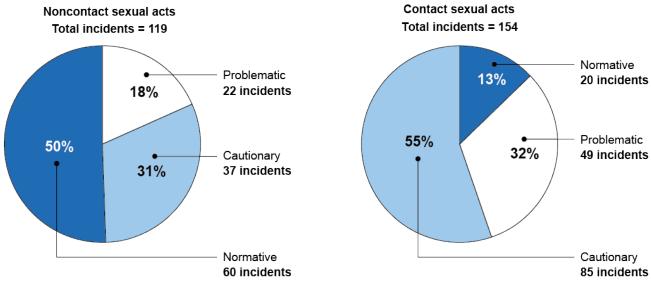
such as spankings, grabbing, or groping. Rape or sexual assault were the second most frequently cited allegation, appearing in 17 of the incident reports.<sup>20</sup> Verbal sexual harassment or bullying was the third most frequently cited allegation—appearing in 14 reports—followed by sharing or displaying nude images or pornography, appearing in 12 reports.

We also analyzed data on the severity of incidents reported from March through May 2023, the most recent data available since DODEA required school administrators to use the NCRT when reporting incidents of unwanted sexual behavior (see fig. 5). About one-half of the 119 reported noncontact sexual acts during this period were classified as normative. However, the large majority of the 154 reported contact sexual acts were classified as cautionary or problematic (55 and 32 percent, respectively).<sup>21</sup>

 $<sup>^{20}\</sup>mathrm{Most}$  of these alleged incidents occurred off campus while at least 2 occurred on campus.

<sup>&</sup>lt;sup>21</sup>The assessed severity of incidents involving contact and noncontact sexual acts differed by grade-level, with lower proportions of incidents being classified as problematic at the elementary level versus middle, high, or mixed-grade levels (e.g., middle and high school students). For example, 15 percent of incidents involving contact sexual acts were classified as problematic at the elementary level vs. 80 percent at the middle-school level and 63 percent at the high-school level. Similarly, about 6 percent of incidents involving non-contact sexual acts reported at the elementary level were classified as problematic compared to 55 percent at the middle-school level and 40 percent at the high-school level.

Figure 5: Department of Defense Education Activity (DODEA) School-Assessed Severity of Reported Incidents of Alleged Contact and Noncontact Sexual Acts among Students, March through May 2023



Source: GAO analysis of DODEA incident reporting data. | GAO-24-106182

Note: Percentages may not add to 100 due to rounding. School leaders from three of the 11 DODEA schools we visited said they did not submit an incident report for normative behavior. As a result, these data may not reflect all incidents that occurred in DODEA schools over this period that involved normative behavior.

School Leaders Raised
Concerns about Staff
Administrative Burden and
Unintended
Consequences for
Students

School officials at all 11 schools we visited acknowledged the importance of reporting incidents, but officials at about half of the schools raised concerns about the enhanced reporting requirements, particularly for normative incidents. For example, one elementary school principal said that it took half a day to complete one incident report, and estimated filing about one report a week, which interfered with other work duties. This official said they often felt more like a social worker rather than a school leader. School officials from three schools said they did not complete incident reports for normative unwanted sexual behavior, despite DODEA's requirement to do so. One explained that doing so would be impractical, given the many other demands on their time.

Officials from two of the 11 schools we visited further expressed concern about undue stigma for younger students who exhibit normative (i.e., developmentally appropriate) behavior, even if it is not appropriate at school. For instance, one official noted that prior to DODEA's emphasis on universal reporting, it was often sufficient for a teacher or counselor to quietly redirect the student's behavior and discuss the incident with parents. Now, they said even behavior that is developmentally

appropriate must be investigated. The administrator noted that this practice can also have negative effects on parents, who worry that their child may be unfairly labeled. Further, the official said that it can lead to feelings of shame and humiliation for the child being investigated.

DODEA officials said they require schools to report all unwanted sexual behaviors at school to fulfill their obligation to assess trends and monitor school responses to such behaviors. Additionally, these officials said that although incidents may involve normative behavior, such behavior (e.g., unwanted touching or discussing body parts) may still be inappropriate for school and should be tracked to ensure that the behavior is not repeated.

However, DODEA's requirement to use the NCRT to report on the severity of behaviors, including normative behaviors, is relatively new and has not been assessed since its rollout agency wide. Standards for internal control in the federal government state that when there are significant changes in an entity's processes, management should review the processes in a timely manner to assess whether they are designed and implemented appropriately.<sup>22</sup>

While DODEA sought limited feedback on the NCRT during its pilot phase, it has not sought agency-wide feedback since the end of the pilot.<sup>23</sup> In particular, it has not asked school administrators about the amount of time spent investigating and reporting normative incidents, and whether there are opportunities to reduce reporting burden or stigma for these incidents. Without doing so, DODEA may be missing potential opportunities to streamline its current reporting process in response to school administrator concerns while still fulfilling its obligations. DODEA officials agreed that collecting such feedback from school administrators would be useful now that their pilot of the NCRT is over. Further, they stated that collecting such feedback aligns with their commitment to continuous process improvement.

<sup>&</sup>lt;sup>22</sup>GAO, *Standards for Internal Control in the Federal Government*, GAO-14-704G (Washington D.C., September 2014).

 $<sup>^{23}</sup>$ DODEA officials said that they held 10 calls with 37 participants from May through July 2019 to review the NCRT and obtained final feedback on the piloted tool from six participants.

DOD Has Not Fully Addressed Factors that Prevent DODEA Students from Accessing Needed Support Services

FAP Does Not Consistently Coordinate with DODEA to Address Problematic Sexual Behaviors, as Required by DOD Policy

FAP staff on military installations do not consistently coordinate with DODEA school administrators, as required by policy, when developing installation-wide response strategies following incidents involving child and youth problematic sexual behavior at DODEA schools.<sup>24</sup> DODEA school administrators from nearly all schools we visited (10 of 11) said they were frequently excluded from multidisciplinary teams. These teams are tasked with assessing risks, addressing safety needs, and coordinating services and supports following all problematic incidents.

DODEA school administrators said they refer cases of problematic sexual behavior to FAP, as required by DOD policy, but frequently described their relationship with FAP as one-sided. One community superintendent described FAP's installation-wide response process as a "black box." In addition to being excluded from the multidisciplinary team, administrators from nearly all the schools we visited (10 of 11) told us that FAP rarely provides them with the findings of the multidisciplinary team. School administrators from six of 11 schools we visited said they are left wondering whether the student exhibiting problematic behavior should be removed from school or how to best support students harmed by those students' behaviors. Installation FAP officials we interviewed described different interpretations of when to include DODEA on the multidisciplinary team.

Without DODEA's presence, the multidisciplinary team cannot leverage DODEA's expertise and insights, potentially weakening the effectiveness of the response. School administrators from most schools we visited (seven of 11) said they often have insights and knowledge of their students that are essential to developing and implementing effective safety plans. For example, school administrators can change students'

<sup>&</sup>lt;sup>24</sup>DOD Instruction 6400.10 requires FAP to convene the multidisciplinary team, which is composed of select installation entities that are required to take an active role in the case under review.

class schedules if they need to be physically separated. Further, school administrators often have preexisting relationships with parents, whose support is needed for students to participate in any services FAP offers.

Although CYA officials told us that they have taken steps to improve staff awareness, they also acknowledged that some installation FAP staff may still not understand the December 2021 policy requiring them to include DODEA in the multidisciplinary team.<sup>25</sup> Further, CYA officials told us that they have not assessed the effectiveness of their efforts to ensure that DODEA is included on the multidisciplinary team. The Military Community Advocacy Directorate—which oversees CYA and FAP—has developed a new case management system that captures information on incidents reported to FAP, including those involving DODEA students, according to these officials. Monitoring these data could help the Military Community Advocacy Directorate—and specifically CYA and FAP—better understand how consistently DODEA is being included in the multidisciplinary team, as required by DOD policy. Such a step would be consistent with standards for internal control in the federal government which state that management should identify, analyze, and respond to risks related to achieving objectives. Without systematically monitoring DODEA's inclusion in multidisciplinary teams, the Military Community Advocacy Directorate may not know which locations would benefit from additional reinforcement of DOD's policy to assure that it is consistently implemented. This could hamper the effectiveness of the multidisciplinary teams.

Most FAP Clinicians Do Not Have Expertise to Treat Students Exhibiting Problematic Sexual Behaviors, Despite Ongoing Efforts to Close Training Gaps

Few FAP clinicians have the expertise needed to appropriately support children and youth who exhibit problematic sexual behavior. DOD policy requires that FAP clinicians have the appropriate training to provide services to students both harmed by and exhibiting problematic sexual behavior. <sup>26</sup> Studies have shown that qualified clinicians who offer immediate intervention services can help break the cycle of problematic sexual behaviors (see sidenote). While FAP clinicians in the five military communities we visited said they had some experience supporting children and youth harmed by sexual violence due to FAP's longstanding role in responding to child abuse, none said they had the training needed

<sup>&</sup>lt;sup>25</sup>Specifically, officials said that since 2021 they have provided written guidance on the multidisciplinary team process to service branch FAPs, reinforced this information in FAP staff meetings and trainings, and developed online resources including a "Multidisciplinary Team Checklist" for FAP staff and clinicians.

<sup>&</sup>lt;sup>26</sup>DOD Instruction 6400.10.

#### Studies Show that Clinical Services Help Address Problematic Sexual Behaviors

According to the Department of Justice, studies have shown that intervention can break the cycle of problematic sexual behavior, and that youth exhibiting problematic sexual behavior successfully respond to interventions that address the behavior and promote healthy development. Intervening early and appropriately works to reduce revictimization as well as mitigate the negative impact on all youth and families involved. The most comprehensive treatment services for youth exhibiting problematic sexual behavior include familyand community-based interventions, according to the studies.

Source: GAO analysis of Department of Justice studies. | GAO-24-106182

to treat youth exhibiting problematic sexual behaviors. For example, a FAP clinician from a military community in the United States said that they did not feel qualified to treat children exhibiting this behavior because they had not received specialized training. This clinician said they would typically refer such children to off-installation providers as a result.

CYA and FAP officials stated that they have taken various steps within their limited existing resources to make clinically focused training on problematic sexual behavior available in the years since Congress assigned FAP responsibility for responding to these behaviors in 2018.27 The most significant of these training opportunities is CYA's course on using cognitive behavioral therapy to treat problematic sexual behavior, which officials described as the "gold standard" for treatment. This fiveday course is designed to equip FAP clinicians with the necessary expertise to treat children and youth exhibiting problematic sexual behaviors. To fulfill the course requirements, participants much also complete additional clinical hours.<sup>28</sup> In 2023, CYA officials enrolled approximately 25 FAP clinicians in this training. However, most clinicians either dropped out of the course due to the time commitment required or deployment assignments, or could not complete course requirements because no families had consented to treatment, according to CYA officials.29

CYA and FAP officials acknowledged low course completion rates and said they offer other less time-intensive courses that may be more accessible to clinicians.<sup>30</sup> However, officials acknowledged that these other courses alone may not be sufficient to close the gap in clinical

 $<sup>^{27}\</sup>mathrm{CYA}$  officials said that the additional responsibility was not paired with an increase in funding.

<sup>&</sup>lt;sup>28</sup>CYA and FAP officials said they developed the course with The University of Oklahoma and provided the course at the United States Army Military Police School.

<sup>&</sup>lt;sup>29</sup>FAP clinical staffing shortages and corresponding high caseloads may also contribute to low completion rates. On all five military communities we visited, installation FAP officials said that they are understaffed and not able to leave their post for training without severely affecting their ability to provide needed services. According to CYA officials, about 30 percent of FAP staff and clinical positions were vacant as of June 2023.

<sup>&</sup>lt;sup>30</sup>In particular, CYA an FAP have added a problematic sexual behavior module to their broader three-day course on trauma-focused cognitive behavioral therapy for children and youth. As of January 2024, about 40 percent of FAP clinicians have completed this course, according to CYA and FAP officials. CYA also makes shorter self-paced courses on problematic sexual behaviors available for clinicians to complete through an online portal.

expertise needed for FAP clinicians to treat problematic sexual behaviors. Officials said they are considering steps to improve the accessibility of their "gold standard" course on treating problematic sexual behavior, such as by offering a virtual option for overseas clinicians.

While such steps may prove successful, the Military Community Advocacy Directorate—which houses CYA and FAP—does not have plans to measure progress in assuring that FAP clinicians with expertise are available where they are most needed. However, the Military Community Advocacy Directorate's new case management system could allow it to do so. For instance, it could use data collected through this system to identify the military installations with the most reported incidents of problematic sexual behavior, assess how many clinicians on those installations have needed expertise, and target those installations for additional training opportunities as appropriate. These data could also help the Military Community Advocacy Directorate to monitor the progress of its efforts to close FAP's clinical expertise gap more broadly and determine where additional action is needed.

When asked why they had not used the case management system for this purpose, CYA and FAP officials stated that the system was relatively new but agreed that it could be a useful resource to help them monitor their progress in closing gaps in clinical expertise. Standards for internal control in the federal government state that management should identify, analyze, and respond to risks related to achieving objectives.<sup>31</sup> Such actions could better position FAP to effectively interrupt the cycle of these behaviors. Absent effective interventions, there could be a risk of repeated incidents that could pose a safety risk to the school community.

The Military Community
Advocacy Directorate Has
Not Assessed the
Effectiveness of its Efforts
to Encourage Families to
Accept Support Services
for their DODEA Students

Despite widely acknowledged low participation in FAP support services, the Military Community Advocacy Directorate's CYA has not assessed the effectiveness of its efforts to encourage families to accept services following incidents of problematic sexual behavior. CYA officials said they were aware that few families accept the support services—which include both clinical services and non-clinical case management and resources—to help children and families after an incident.

DODEA school administrators or installation FAP staff in all five military communities we visited described several reasons why, in their experience, families rarely accept FAP services. For example, families

<sup>31</sup>GAO-14-704G.

may fear stigma and negative consequences for their military careers and their children's futures. Career concerns include losing an overseas assignment or being recalled stateside if the servicemember's child is found to need more extensive services than can be provided abroad.<sup>32</sup> Concerns for children include losing opportunities to enroll in Senior Reserve Officers' Training Corps programs, attend military academies, or enlist in the military.

DODEA school administrators or installation FAP staff from four of five military communities we visited also told us that military families do not welcome contact from FAP because of its longstanding role as the military's domestic violence and child abuse agency. Officials from all five military communities we visited also said that military communities are small and families may fear reactions of their neighbors or colleagues. Higher-ranking military officials can be particularly sensitive to such reputational stigma, according to school administrators from one military community.

Officials from two of the five military communities we visited described parents' reluctance to even acknowledge their children's involvement with problematic sexual behavior. For example, the officials said that parents declined support services in one case because the two children involved were of the same sex. In another, officials said the child's parents did not accept that their child had cyberbullied and distributed nude images of a student because the evidence had been deleted.

When asked about the widely recognized reluctance among military families to accept support services from FAP, CYA officials said that they are working to destigmatize the topic of problematic sexual behavior and educate parents on how FAP can help. For instance, they said they distribute informational pamphlets to families and recently produced a podcast on this topic. However, CYA officials said they have not assessed the effectiveness of these efforts, nor have they consulted stakeholders—such as service FAPs or installation leadership—to assure that their efforts are well-targeted.<sup>33</sup> CYA officials stated that it is

<sup>&</sup>lt;sup>32</sup>FAP officials noted that it is rare for a family to be relocated due to a child's need, and generally only occurs in severe cases where the child needs highly specialized care.

<sup>&</sup>lt;sup>33</sup>At the time of our review, CYA officials said they were in the process of developing and testing new data features to capture systematic data on participation in FAP services offered following reported incidents. CYA officials said they were still conducting data reliability tests at the time of our review and that they expect to include this information in their fiscal year 2024 annual report to Congress.

premature to evaluate their efforts because they have not yet analyzed the first year of data they have collected through the Military Community Advocacy Directorate's new case management system on participation in services offered by FAP. However, CYA officials have already acknowledged that participation is low; further, CYA is not collecting data on reasons for nonparticipation or the results of their de-stigmatization efforts.

Standards for internal control in the federal government state that management should identify, analyze, and respond to risks related to achieving objectives.<sup>34</sup> Without taking steps to better understand whether their existing efforts to reduce stigma and educate parents are effectively addressing low participation, the Military Community Advocacy Directorate, and specifically FAP, may continue to be hindered in their ability to help children in need and respond effectively to problematic sexual behavior among children and youth in military communities.

The Military Community
Advocacy Directorate Has
Not Assessed the
Sufficiency of its
Response to Incidents
Involving CivilianDependent Students

The Military Community Advocacy Directorate's CYA has chosen to generally restrict FAP clinical services to military dependents, leaving the nearly one in five DODEA students who are civilian-dependent with limited options for treatment (see table 3). However, the Military Community Advocacy Directorate has not assessed the effectiveness of its policy choices regarding incidents that involve civilian-dependent students. Studies have shown that children and youth who are harmed by or exhibit problematic sexual behaviors benefit from immediate, trauma-informed clinical support services. Without such efforts, children and youth who are harmed by problematic sexual behaviors can experience depression, self-harm, or suicidal ideation. Further, children and youth exhibiting these behaviors can continue to harm, disrupt school climate, and pose safety concerns to themselves and others.<sup>35</sup>

<sup>34</sup>GAO-14-704G.

<sup>&</sup>lt;sup>35</sup>FAP conducts initial assessments of all students in the immediate aftermath of problematic sexual behavior, as required by DOD policy. However, FAP policy limits FAP clinical services, such as trauma informed counseling and cognitive behavioral therapy, to children and youth who are eligible to receive care at a military treatment facility (generally children of active-duty servicemembers). Further, FAP limits its clinical case management services, which may involve assessing recovery and updating safety plans, to such students.

Table 3: Family Advocacy Program Support and Follow Up Services Available for Civilian-Dependent and Military-Dependent Students

# Civilian-dependent students: Military-dependent students: Initial safety planning Information and referral to community-based services Clinical case management Clinical intervention and follow up (e.g., treatment plan, updated regularly) Safety and supervision planning (initial and ongoing, updated as appropriate) Information and referral to military- or community-based services Parent engagement (ongoing)

Source: GAO analysis of Family Advocacy Program (FAP) Policies and Procedures. | GAO-24-106182

Note: DOD's Military Community Advocacy Directorate policy states that FAP should provide trauma-informed assessment, rehabilitation, and treatment only to children and youth involved in problematic sexual behavior who are eligible to receive treatment at a military treatment facility. According to Child and Youth Advocacy officials, these are generally children of active-duty servicemembers (military dependents).

Civilian-dependent students harmed by or exhibiting problematic sexual behaviors generally face the greatest challenges in obtaining care, according to DODEA school administrators and FAP staff in all five military communities we visited. For example, school administrators in one overseas DODEA school told us about a civilian-dependent student exhibiting problematic sexual behaviors whose family received support from an unqualified local clinician outside the installation. These officials said that treatment did not result in positive change in the student's conduct at school. In another example, an installation FAP clinician told us that they were able to offer crisis counseling to a civilian-dependent student in the immediate aftermath of being harmed by problematic sexual behavior. However, the clinician said they could not offer the longer-term trauma-informed care the student really needed because of the student's civilian-dependent status.

FAP staff and DODEA school administrators also shared concerns about civilian-dependent students' practical ability to obtain appropriate care from community-based providers, particularly overseas. In practice, civilian-dependent students and their families often have limited or no options for care in the local community, according to officials from all the three military communities we visited overseas. For example, FAP clinicians at one overseas installation said that it is extremely difficult to find local clinicians who speak English. In addition, they said that American norms around appropriate, acceptable sexual behaviors differ from those in their host country, making it harder to find a clinician who

can successfully address the situation. One FAP clinician said that local off-base clinicians do not have the expertise or experience needed to treat students yet advertised themselves as a legitimate source of care. Other challenges include long waitlists and long commutes to access care. DODEA school administrators also described limitations in the ability of their own staff to meet the needs of its students.<sup>36</sup>

CYA officials acknowledged these challenges, including that the policy created gaps in services available for civilian-dependent DODEA students.<sup>37</sup> CYA officials noted that they focused quickly on developing the policy to assure that they fulfilled their responsibilities under statute. As such, CYA officials said they relied upon Defense Health Agency (DHA) eligibility requirements for receiving clinical services at military health facilities.<sup>38</sup> However FAP is not part of DHA, and DHA officials said they have no role in determining eligibility for FAP services. Furthermore, CYA officials told us that they adopted DHA's framework without assessing their own authority or other options to provide services to civilian dependent students. As of November 2023, CYA officials told us they were not aware of any legal or regulatory provisions that would prohibit civilian-dependent DODEA students from accessing FAP clinical services.

CYA and FAP officials both acknowledge the importance of providing clinical support services to all students harmed by or exhibiting problematic sexual behaviors as well as the potential negative effects of failing to provide adequate, timely care. Federal internal control standards state that when there are significant changes in an entity's processes, management should review the processes in a timely manner to assess

<sup>&</sup>lt;sup>36</sup>For instance, officials stated that school psychologists and school counselors are not trained to provide anything more than limited assistance in the immediate aftermath of a crisis. DODEA school administrators, school psychologists, and counselors also told us that their most pressing concerns are assessing and responding to the increasing threats of suicide and suicidal ideation among students. Additionally, while school behavioral health specialists are seen as very helpful resources, they are only available in some schools and students generally need TRICARE (military health insurance) to access them.

<sup>&</sup>lt;sup>37</sup>As of 2018, FAP was required to provide a consistent, standardized response across all service branches and installations to problematic sexual behavior in children and youth. See Pub. L. No. 115-232, § 1089(a), (b)(1), 132 Stat. 1636, 1996.

<sup>&</sup>lt;sup>38</sup>DHA manages military treatment facilities, which also provide mental health services like behavioral health specialists. Civilian dependents are not generally eligible to receive treatment at military health facilities.

whether they are designed and implemented appropriately.<sup>39</sup> Without assessing whether its current policy limiting access to services for civilian students is necessary and sufficient to assure safety, the Military Community Advocacy Directorate's ability to develop an effective response to problematic sexual behavior on military installations may be undermined. Further, DODEA students and school communities, particularly in overseas military installations with high proportions of civilian-dependent students, may remain particularly vulnerable to the short- and long-term effects of problematic sexual behaviors.

#### Conclusions

DODEA has taken important steps in recent years to respond to incidents of unwanted sexual behavior among students, including more complete incident reporting about the nature and severity of alleged incidents. These efforts were designed, in part, to help DODEA fulfill its responsibility to maintain an educational environment that is free from sex discrimination for all. However, DODEA has not systematically collected feedback from school administrators about the benefits and drawbacks of its current reporting process—particularly the value of investigating and reporting all normative incidents. Doing so would provide DODEA an opportunity to assess and refine its reporting process to ensure that DODEA is balancing its need for quality information without undue reporting burdens or stigmatizing young students.

In response to a 2018 federal requirement that FAP develop a policy to ensure that it responds consistently to problematic sexual behavior in children and youth, the Military Community Advocacy Directorate's CYA has developed and implemented new policies and procedures and worked to train staff to provide clinical care to military-dependent students. However, various gaps in the Military Community Advocacy Directorate's strategy remain. In particular, the effectiveness of efforts to ensure that DODEA is included in the multidisciplinary team; to close gaps in FAP clinical expertise; or to address low participation in its support services. Further, the Military Community Advocacy Directorate has not assessed the sufficiency of its approach to incidents involving civilian-dependent students, including the potential effects on the safety of the broader DODEA school community.

With the broad outlines of its new system for addressing problematic sexual behavior now in place, the Military Community Advocacy Directorate has an opportunity to assess FAP's current treatment and

<sup>&</sup>lt;sup>39</sup>GAO-14-704G.

response capabilities and to address existing gaps. Such steps will help ensure that FAP provides effective, consistent, community-wide responses to problematic sexual behaviors among children and youth in military communities.

#### Recommendations for Executive Action

We are making the following five recommendations to DOD:

The Deputy Under Secretary of Defense for Personnel and Readiness should direct the DODEA Director to assess the benefits and drawbacks of its current reporting process for incidents of normative sexual behavior among students. As a part of its efforts, DODEA should obtain school administrators' feedback on the amount of time spent investigating and reporting normative incidents, and whether there are opportunities to reduce reporting burden or stigma for these incidents. (Recommendation 1)

The Deputy Under Secretary of Defense for Personnel and Readiness should direct the Military Community Advocacy Directorate to monitor the consistency with which DODEA is included on the multidisciplinary team, and take further actions, as needed, to improve participation. (Recommendation 2)

The Deputy Under Secretary of Defense for Personnel and Readiness should direct the Military Community Advocacy Directorate to monitor the results of its efforts to assure that FAP clinicians have the training needed to treat students exhibiting problematic sexual behavior and take additional actions, as needed, to close gaps in clinical expertise. This assessment could leverage data from the Military Community Advocacy Directorate's new case management system. (Recommendation 3)

The Deputy Under Secretary of Defense for Personnel and Readiness should direct the Military Community Advocacy Directorate to evaluate and monitor the effectiveness of its existing and planned strategies to systematically address low participation in FAP support services. (Recommendation 4)

The Deputy Under Secretary of Defense for Personnel and Readiness should direct the Military Community Advocacy Directorate to assess whether the current response policy to incidents of problematic sexual behaviors involving civilian-dependent students is sufficient to ensure the safety of all DODEA students and develop a plan to bridge any gaps. This assessment could include a review of current eligibility policies and

identify opportunities to offer clinical support services to all DODEA students. (Recommendation 5)

#### **Agency Comments**

We provided a draft of this report to DOD for review and comment. DOD generally agreed with our recommendations. Specifically, DOD agreed with the substance of our first recommendation, which is to assess the benefits and drawbacks of its current reporting process for incidents of normative sexual behavior among students. DOD said it takes its responsibility to protect students from all unwanted sexual behaviors (normative or not) seriously and noted that it would continue to engage with stakeholders to refine its approach to monitoring for all inappropriate student sexual behaviors. DOD agreed with our four other recommendations.

DOD also provided technical comments, which we incorporated as appropriate. In particular, DOD provided additional information regarding efforts to train FAP clinical staff on treating problematic sexual behaviors. We acknowledged these efforts in our report and revised our recommendation to clarify that DOD should monitor the success of its efforts to close gaps in clinical expertise and take additional action, as needed.

We are sending copies of this report to the appropriate congressional committees, the Secretary of Defense, and other interested parties. In addition, the report will be available at no charge on GAO's web site at <a href="http://www.gao.gov">http://www.gao.gov</a>.

If you or your staff should have any questions about this report, please contact me at (617) 788-0580 or <a href="mailto:nowickij@gao.gov">nowickij@gao.gov</a>. Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff who made key contributions to this report are listed in appendix II.

Jacqueline M. Nowicki

Director, Education, Workforce, and Income Security Issues

# Appendix I: Comments from the Department of Defense



### OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE 1500 DEFENSE PENTAGON WASHINGTON, D.C. 20301-1500

IJAN 2 4 2024

Ms. Jacqueline M. Nowicki Director, Education, Workforce, and Income Security Issues U.S. Government Accountability Office 441 G Street, NW Washington DC 20548

Dear Ms. Nowicki:

This transmits the Department of Defense (DoD) response to the Government Accountability Office draft report, GAO-24-106182, "K-12 EDUCATION: DoD Has Taken Steps to Support Students Affected by Problematic Sexual Behaviors, but Challenges Remain," dated February 2024 (GAO Code 106182).

Attached is DoD's response to the subject report. My point of contact is Ms. Jasmine McLeod who may be reached by email at Jasmine.Mcleod@dodea.edu or by phone at phone (703) 438-0849.

Performing the Duties of the Assistant Secretary of Defense for Manpower and Reserve Affairs

Enclosure: As stated

#### GOVERNMENT ACCOUNTABILITY OFFICE DRAFT REPORT DATED DECEMBER 21, 2023 GAO-24-106182 (GAO CODE 106182)

"K-12 EDUCATION: DOD HAS TAKEN STEPS TO SUPPORT STUDENTS AFFECTED BY PROBLEMATIC SEXUAL BEHAVIORS, BUT CHALLENGES REMAIN"

#### DEPARTMENT OF DEFENSE COMMENTS TO THE GAO RECOMMENDATION

RECOMMENDATION 1: The [Government Accountability Office (GAO)] recommends that the Deputy [Under Secretary] of Defense for Personnel and Readiness should direct the [DoD Education Activity (DoDEA)] Director to assess the benefits and drawbacks of its current reporting process for incidents of normative sexual behavior among students. As a part of its efforts, [DoDEA] should obtain school administrators' feedback on the amount of time spent investigating and reporting normative incidents, and whether there are opportunities to reduce reporting burden or stigma for these incidents. (Recommendation 1)

**DoD RESPONSE**: Partially Concur. DoDEA takes very seriously the responsibility for protecting against any student being subjected to unwelcome and offensive conduct of a sexual nature, even if technically an act is classified as normative for the age and developmental level of the student exhibiting the behavior. DoDEA shall continue to engage directly with the field, as recommended, on improving methodologies used for monitoring all inappropriate student sexual behaviors in support of maintaining a sexual harassment-free learning environment.

The GAO's recognition of DoDEA's dedication to reporting all incidents of problematic sexual behaviors aligns with our unwavering commitment to ensuring a learning environment free from sex discrimination and maintaining the safety and well-being of our students.

Our commitment to continuous improvement is deeply ingrained in our organizational philosophy. It aligns seamlessly with our Blueprint for Continuous Improvement, representing DoDEA's dedication to being a learning organization that constantly strives to enhance overall effectiveness and make a positive, measurable impact on our stakeholders, primarily our students.

**RECOMMENDATION 2:** The GAO recommends that the Deputy [Under Secretary] of Defense for Personnel and Readiness should direct [Child and Youth Advocacy (CYA)] to monitor the consistency with which [DoDEA] is included on the installation-wide response team, and take further actions, as needed, to improve participation. (Recommendation 2)

DoD RESPONSE: Concur.

**RECOMMENDATION 3:** The GAO recommends that the Deputy [Under Secretary] of Defense for Personnel and Readiness should direct CYA to assess capacity to clinically assess

Appendix I: Comments from the Department of

2

and treat students exhibiting problematic sexual behavior and develop a plan to address any identified deficits. This assessment could complement workforce study and include a review of clinical licensure rates and training needs. (Recommendation 3)

**DoD RESPONSE**: Concur. This assessment could complement Family Advocacy Program's workforce study and include a review of clinical licensure rates and training needs. (Recommendation 3)

**RECOMMENDATION 4:** The GAO recommends that the Deputy [Under Secretary] of Defense for Personnel and Readiness should direct CYA to evaluate and monitor the effectiveness of its existing and planned strategies to systematically address low participation in FAP support services. (Recommendation 4)

DoD RESPONSE: Concur. (Recommendation 4)

**RECOMMENDATION 5**: The GAO recommends that the Deputy [Under Secretary] of Defense for Personnel and Readiness should direct Military Community Advocacy to assess whether CYA's current policy for FAP's response to incidents of problematic sexual behaviors involving [civilian dependent] students is sufficient to ensure the safety of all [DoDEA] students and develop a plan to bridge any gaps. This assessment could include a review of current eligibility policies and identify opportunities to offer clinical support services to all [DoDEA] students. (Recommendation 5)

DoD RESPONSE: Concur. (Recommendation 5)

# Appendix II: GAO Contact and Staff Acknowledgments

GAO contact	Jacqueline M. Nowicki, (617) 788-0580, or nowickij@gao.gov
Staff Acknowledgments	In addition to the contacts named above, Ellen Phelps Ranen (Assistant Director), Justin Dunleavy (Analyst-in-Charge), Madeleine Orcales, Isaac Pavkovic, and Manuel Valverde made key contributions to this report. Also contributing to this report were Charlotte Cable, Nancy Cosentino, Sara Daleski, Jean McSween, John Mingus, Mimi Nguyen, Lauren Shaman, and James Rebbe.

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