



DEPARTMENT OF THE ARMY
UNITED STATES ARMY GARRISON BAVARIA
UNIT 28130
APO AE 09114

IMBA-MWR-A

JUL 30 2013

MEMORANDUM FOR All Military Personnel assigned to the USAG Bavaria

SUBJECT: USAG Bavaria Policy Letter #21, Physical Separation in Domestic Violence Situations

1. Violence against a spouse is contrary to the values and standards of the United States Army. Spouse abuse is a community issue, which requires a consistent and Coordinated Community Response (CCR). Essential to the response is the support of individual units in ensuring that victims of domestic violence are offered immediate safety, long-term protection, services, and support. If a victim of domestic violence is allowed immediate access to the offender, there is a potential for more violence to occur.

a. When the Military Police (MP) or civilian law enforcement respond to a domestic disturbance involving physical assault and the active duty Soldier is identified as the offender, the Soldier's commander will ensure the Soldier is placed in the barracks or with a responsible individual for a minimum of 72 hours after the incident has occurred. During the 72 hours of separation, no contact is permitted between the parties involved. No form of contact means face-to-face, telephonic, or electronic communication (i.e. email, texting, and social media). Clinical FAP staff will initiate immediate contact with the offender and the victim by the next working day or within the 72 hours to assess the level of risk and to address safety issues. The commander will make every effort to ensure the Soldier makes contact with clinical FAP before they are allowed to return to the home.

b. If separation of the parties is warranted, the commander will ensure that the Soldier does not return to on- or off-post housing until the cool-off period has expired and both parties attend the clinical FAP interview. When the clinical FAP case worker recommends continued separation, the command will make a determination whether the Soldier may return home. The case manager's assessment shall be a substantial factor in this determination, but the command will need to base the decision on all factors related to this incident.

c. When a Soldier must retrieve basic necessities from the home, the commander will ensure that the victim or offender is notified and that a unit escort accompanies and remains with the Soldier while in the home. The escort must be at least one grade higher than the Soldier, and must ensure the Soldier returns to the barracks or to the command-assigned individual after gathering the basic necessities.

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d. When a non-military spouse is the alleged offender, commanders ensure the safety of the victim. Safety measures may include placing the Soldier in the barracks or in emergency shelter. Emergency shelter can be arranged by a Domestic Abuse Victim Advocate (DAVA) and can be reached at +49 1622-96-0661.

e. If the alleged victim is an active duty Soldier and the primary caregiver to the children, the commander will make every effort to ensure the non-military spouse is removed from quarters and barred from the installation for the 72-hour cooling-off period. The non-military spouse will be authorized installation access for interviews with Clinical FAP, the PMO, and/or Criminal Investigation Division (CID), for emergency medical assistance, and/or for continued employment. Non-military spouses barred from the installation will sign in at the MP station prior to utilizing any of the above services, and will sign out at the MP station prior to leaving the installation. Clinical FAP staff will initiate contact with the alleged offender and alleged victim within 72 hours (or next working day) to address safety issues. Commanders will consult with the clinical FAP staff before making a recommendation to the Garrison Commander to lift the bar.

f. After the 72-hour cooling-off period, clinical FAP will conduct a risk assessment and inform the commander on the separation status. The decision to maintain mandatory separation will be decided by the commanders based on Clinical FAP.

2. The POC for this policy memorandum is the USAG Bavaria FAP manager at 476-2650.



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Commanding